



## Newcomer & International Student Pre-Registration for Admission to School

Print this registration, sign it and return to: Lynn MacDonald  
**OR** send electronically to: International Student Coordinator  
[Lynn.MacDonald@nbed.nb.ca](mailto:Lynn.MacDonald@nbed.nb.ca) Anglophone South School District  
490 Woodward Avenue  
Saint John, NB Canada E2K 5N3

**If you are a student that requires a Letter of Acceptance to apply for your Study Permit, you must include/send a \$250.00 application fee with the Registration Form. Money order or bank draft made payable to the "Minister of Finance". Once the Registration Form and application fee are received, a Letter of Acceptance will be issued.**

### Parent Information: (Please print)

Father – Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Country of Origin \_\_\_\_\_  
Mother – Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Language family speaks at home (Mother Tongue) \_\_\_\_\_  
Mother's Last Name (before marriage) \_\_\_\_\_ Other Languages Spoken \_\_\_\_\_  
Email Address (Parents) \_\_\_\_\_

### Student Information: (Please print)

Expected Date of Entry to Canada \_\_\_\_\_

Student Last Name \_\_\_\_\_ First & Middle (Birth) Names \_\_\_\_\_ Preferred Name \_\_\_\_\_

Date of Birth (mm/dd/year) \_\_\_\_\_ Male  Female

Name of Homestay (if not living with Parent or Custodian) \_\_\_\_\_

NB Address: \_\_\_\_\_  
Street

City/Town/Village \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone: (\_\_\_\_\_) (daytime) (\_\_\_\_\_) (daytime)  
(Mother or Homestay) (Father or Homestay)  
(\_\_\_\_\_) (Other) (\_\_\_\_\_) (Other)

Siblings:

Name \_\_\_\_\_ Birthdate (mm/dd/year) \_\_\_\_\_ Name \_\_\_\_\_ Birthdate (mm/dd/year) \_\_\_\_\_

Name \_\_\_\_\_ Birthdate (mm/dd/year) \_\_\_\_\_ Name \_\_\_\_\_ Birthdate (mm/dd/year) \_\_\_\_\_

**Complete this section ONLY if the student will be living with a Custodian/Guardian: (Please print)**

Parent Permanent Address in Home Country

\_\_\_\_\_

City \_\_\_\_\_ Country \_\_\_\_\_ Postal Code \_\_\_\_\_

Country Code/City Code/Telephone \_\_\_\_\_ Cell phone \_\_\_\_\_

The parents have appointed the following person as the **Legal Custodian**. **I will provide notarized letters** (one signed by the parent in their home country and one signed by the Legal Custodian in Canada) confirming the appointment. A Legal Custodian must be a Canadian Citizen or a Permanent Resident. **I understand that the student may not start school until he/she provides the School District with notarized letters (one signed by the parent and one signed by the Legal Custodian in Canada) as well as Proof of Citizenship or Permanent Residency of the Custodian.** (Custodianship applications are available upon request.)

Custodian Family Name: \_\_\_\_\_ Custodian Given Name: \_\_\_\_\_  
PRINT PRINT

Address: \_\_\_\_\_  
Street City/Town Postal Code Telephone

Custodian Email: \_\_\_\_\_

**Medical Insurance Information:**

New Brunswick Medicare #: (if applicable) \_\_\_\_\_ Expiry Date \_\_\_\_\_

Medical Insurance purchased privately: \_\_\_\_\_

Name of Insurer \_\_\_\_\_ Certificate/Policy No. \_\_\_\_\_ Expiry Date \_\_\_\_\_

*\*It is recommended you have private medical insurance if you do not have NB Medicare. Students living with a guardian **must have** proof of private medical insurance.*

**Health Information: (Please print)**

The student is in good health & able to participate in classes and associated outings? Yes  No

If NO, please explain: \_\_\_\_\_

Specify any ongoing health conditions such as allergies, etc. that the school should be aware of: \_\_\_\_\_

**PROFILE:**

| QUESTION                                       | AGREE | DISAGREE |
|--|-------|----------|
| I can read in my first language                |       |          |
| I can write in my first language               |       |          |
| I have had formal English Language instruction |       |          |
| I have had formal French Language instruction  |       |          |
| I can speak English                            |       |          |
| I can read English                             |       |          |
| I can write in English                         |       |          |
| My parents can speak English                   |       |          |

What grade (K-12) did your child finish? (if applicable): \_\_\_\_\_ Date your child last attended school \_\_\_\_\_ (mm/dd/year)

How many years did your child study English? \_\_\_\_\_

**Immigration Status upon arrival in New Brunswick (Parents please complete)**

|  |       |                          |   |    |                          |
|--|-------|--------------------------|---|----|--------------------------|
| Are you a Canadian Citizen?                    | YES   | <input type="checkbox"/> |   | NO | <input type="checkbox"/> |
| Are you a Provincial Nominee applicant?        | YES   | <input type="checkbox"/> |   | NO | <input type="checkbox"/> |
| Are you a Permanent Resident?                  | YES   | <input type="checkbox"/> | (provide a copy of document)                            | NO | <input type="checkbox"/> |
| Country of citizenship                         | _____ |                          |   |    |                          |
| Do you have a Work Permit?                     | YES   | <input type="checkbox"/> | (provide a copy of document)                            | NO | <input type="checkbox"/> |
| Do you have a University/College Study Permit? | YES   | <input type="checkbox"/> | (provide a copy of document)                            | NO | <input type="checkbox"/> |
| Does your child need a Student Study permit?   | YES   | <input type="checkbox"/> | (*tuition payment (see below) + \$250 registration fee) | NO | <input type="checkbox"/> |

*School begins in September for all students. School ends in June for all students.  
 High school students have two semesters: Semester 1 – September – January / Semester 2 – February – June.  
**If applicable - Tuition 2017-2018 - \$13,948.00/year or \$6974/semester***

(Anglophone South School District (ASD-S) will make the final decision about grade and school enrollment)

**Conditions and Agreement**

1. The student must obey the laws of Canada and the Province of New Brunswick, rules and policies of Anglophone South School District (ASD-S), Early Education and Childhood Development (EECD) and the school which they attend.
2. **The student or custodian/legal guardian must immediately inform the school of any change in address, Homestay or Guardianship.**
3. The student must maintain a FULL time timetable.
4. ASD-S will place students in an age appropriate grade level.
5. ASD-S will have the right to place the student in a school that serves the neighborhood in which the student lives.
6. ASD-S will have the sole discretion in placing students in courses which include English as an Additional Language (EAL) as it deems appropriate.
7. ASD-S may require students to undergo a Language Placement test to determine the need for EAL support.
8. Participating in school and school activities may result in random pictures of the student for promotional purposes or to be used on district or school webpages. **Let your school administration know if you do not grant permission for this.**

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*I hereby certify that the above information is true and complete. I understand that any false or incomplete information submitted in support of my application may invalidate my application and result in the withdrawal by ASD-S of an offered school placement at any time during my registration. I agree to notify ASD-S if I wish to withdraw my application for acceptance and registration.*

Parent Signature \_\_\_\_\_

Date of Application: Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

**THE FOLLOWING DOCUMENTATION IS REQUIRED BEFORE A CHILD STARTS SCHOOL:**

| <b>Registrations with a Student Study Visa</b>  | <b>Registrations with Permanent Residence, Parent Work Visa, Parent Study Visa</b>   |
|---|--|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Signed registration form (submitted before arriving)</li> <li><input type="checkbox"/> Student passport (proof of age)</li> <li><input type="checkbox"/> Student birth certificate</li> <li><input type="checkbox"/> Proof of immunization records</li> <li><input type="checkbox"/> Student transcript (report card) <u>in English</u></li> <li><input type="checkbox"/> Legal guardian/Custodian agreement (if applicable)</li> <li><input type="checkbox"/> Bank draft or cheque for tuition fee in Canadian Dollars<br/>(Made payable to: The Minister of Finance)</li> </ul> <p><b>TUITION FEE: \$13,365 for September 2016 to June 2017</b><br/><b>TUITION FEE: \$13,948 for September 2017 to June 2018</b></p> <p><b>New applications require a \$250 non-refundable application fee in addition to the tuition fee.</b></p> <p><b>Upon arrival in Saint John, the student will need to produce the following:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Study Permit issued by Immigration</li> <li><input type="checkbox"/> Proof of Medical Insurance</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Signed registration form (submitted before arriving)</li> <li><input type="checkbox"/> Student passport (proof of age)</li> <li><input type="checkbox"/> Student birth certificate</li> <li><input type="checkbox"/> Parent Letter of Enrollment to University or College (if applicable)</li> <li><input type="checkbox"/> Proof of immunization records</li> <li><input type="checkbox"/> Student transcript (report card) <u>in English</u></li> <li><input type="checkbox"/> Legal guardian/Custodian agreement (if applicable)</li> </ul> <p><b>Upon arrival in Saint John, you will need to produce the following:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Landing Papers issued by Immigration (Parents &amp; Student)</li> </ul> |

**PLEASE MAKE APPOINTMENT ([Lynn.MacDonald@nbed.nb.ca](mailto:Lynn.MacDonald@nbed.nb.ca)) TO FINALIZE REGISTRATION WHEN YOU ARRIVE IN NEW BRUNSWICK!**

You may fax, email or postal mail the registration and documents to:

**Lynn MacDonald**  
**International Student Coordinator**  
 Anglophone South School District  
 490 Woodward Avenue  
 Saint John, NB E2K 5N3  
 Fax: 506-658-5399  
 Email: [Lynn.MacDonald@nbed.nb.ca](mailto:Lynn.MacDonald@nbed.nb.ca)