



International Student Application for Admission to School

Print this application, sign it and return to:

Lynn MacDonald
International Student Coordinator
Anglophone South School District
490 Woodward Avenue
Saint John, NB
Canada E2K 5N3

**Student Study Permit applications must include a \$250.00 non-refundable application fee.
It may take 7-14 days to process a Study Permit Application**

Parent Information: (Please print)

Family Name

Language spoken at home (Mother Tongue)

Father's Given Name

Email:

Mother's Given Name

Mother's Family Name (before marriage)

Student Information: (Please print)

Date of Entry into Canada: _____

Student Family Name

Student Given Names

Student Canadian Name (if applicable)

DATE OF BIRTH (mm/dd/year) _____

Male Female

NB Address: _____

Street

Expected Date of Arrival: _____

(mm/dd/year)

City Province Postal Code

Siblings:

Name Birthdate (year/mm/dd)

Phone: () (daytime)

Name Birthdate (year/mm/dd)

() (other)

Name Birthdate (year/mm/dd)

Medical Insurance Information:

New Brunswick Medicare #: _____

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: _____

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 Guardian**. **Attached are notarized letters** (one signed by the parent and one signed by the Legal Guardian in Canada) confirming the appointment. A Legal Guardian must be a Canadian Citizen or a Permanent Resident. **I understand that I will not be provided with a final Letter of Acceptance until I provide notarized letters (one signed by the parent and one signed by the Legal Guardian in Canada) as well as Proof of Citizenship or Permanent Residency.** (Guardianship applications are available upon request.)

Guardian Family Name: _____ Guardian Given Name: _____
PRINT PRINT

Address: _____
Street City/Town Postal Code Telephone

Immigration Information (Parents)

Are you a Canadian Citizen? YES NO

Are you a Provincial Nominee applicant? YES NO

Are you a Permanent Resident? YES (attach a copy of document) NO

Country of citizenship _____

Does your child need a Student Study permit? YES (tuition payment of \$12758 + \$250 fee = \$13,008) NO

Do you have a Work Permit? YES (attach a copy of document) NO

Do you have a University/College Study Permit? YES (attach a copy of document) NO

What grade (K-12) did your child finish? (if applicable): _____ How many years did your child study English? _____

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.

(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) 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.

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 SHOULD ACCOMPANY YOUR APPLICATION:

If you need a <u>Student Study Visa</u>	If you have <u>Permanent Residence, Parent Work Visa, Parent Study Visa</u>
<input type="checkbox"/> Signed application form <input type="checkbox"/> Photocopy of student passport (proof of age) <input type="checkbox"/> Photocopy of immunization records <input type="checkbox"/> Photocopy of student transcript (report card) <u>in English</u> <input type="checkbox"/> Photocopy of legal guardian agreement (if applicable) <ul style="list-style-type: none"> <input type="checkbox"/> Bank draft or cheque for tuition fee in Canadian Dollars (Made payable to: The Minister of Finance) <p>(TUITION FEE: \$12,758 for September 2013 to June 2014) New applications require a \$250 non-refundable application fee in addition to the tuition fee of \$12,758 = \$13,008.</p>	<input type="checkbox"/> Signed application form <input type="checkbox"/> Photocopy of student passport (proof of age) <input type="checkbox"/> Photocopy of student landing paper /permit <input type="checkbox"/> Photocopy of parent work permit, study permit or permanent residency <input type="checkbox"/> Photocopy of parent Letter of Acceptance to University or College (if applicable) <input type="checkbox"/> Photocopy of immunization records <input type="checkbox"/> Photocopy of student transcript (report card) <u>in English</u> (if applicable) <input type="checkbox"/> Photocopy of legal guardian agreement (if applicable)

PLEASE MAKE APPOINTMENT (506 658-3019) TO FINALIZE REGISTRATION WHEN YOU ARRIVE IN NEW BRUNSWICK!

You may fax, email or postal mail the application and documentations to:



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 International Student Coordinator
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 Saint John, NB E2K 5N3
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