



**ST. BERNADETTE ELEMENTARY SCHOOL
APPLICATION FORM
2020-2021**

13130 65B Avenue, Surrey, B.C. V3W 9M1 Phone: 604-596-1101 Fax: 604-596-1550 Email: admin@stbernadette.ca

ENROLLING IN GRADE _____

PLEASE PRINT ALL INFORMATION CLEARLY

APPLICATION FEE (non-refundable) \$150.00

Child's Legal Surname:			
Child's First and Middle Name(s):		Usual Name:	
Street Address:	City:	Prov:	Postal Code:
Home Phone:	Child's Sex:	Male	Female
Child's Religion:	Child's Date of Birth: YYYY/MM/DD		
Child's Birthplace: (Province of Canada or Country)		Citizenship:	
Baptism: YES NO	Reconciliation: YES NO	Communion: YES NO	Confirmation: YES NO
Primary language spoken at home: <input type="checkbox"/> ENGLISH <input type="checkbox"/> OTHER (Please specify):			
Indicate English Fluency: <input type="checkbox"/> FLUENT <input type="checkbox"/> GOOD <input type="checkbox"/> POOR			

FATHER'S NAME:	MOTHER'S NAME:
Address & phone# if different from student:	Address & phone# if different from student:
Father's Citizenship:	Mother's Citizenship:
Father's Employer:	Mother's Employer:
Father's Work #:	Mother's Work #:
Father's Cell #:	Mother's Cell #:
Father's Religion:	Mother's Religion:
E-mail Address:	E-mail Address:

If only one parent is listed, proof of legal guardianship and/or court orders are needed for the application to be processed.
If you are not the parent, please state your relationship:
Parish you are registered in: _____ Envelope #: _____

Name of Last School Attended:
Address: _____ Phone #: _____
Name(s) and Birth dates of pre-school siblings:
Are there any health concerns, diagnoses or other medical information the school should be made aware of? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you registered at other schools? _____ If yes – which schools?
How did you hear about our school? _____ If referred, please state who:

(OFFICE USE ONLY-- DATE RECEIVED):	TIME:	CHEQUE#	<input type="checkbox"/> CASH
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UPON ACCEPTANCE, COPIES OF THE FOLLOWING DOCUMENTS MUST BE PROVIDED
Birth Certificate, Immunization Record, Baptismal Certificate (if applicable), Report Card (Gr.1-7 only)

By signing this form, you certify all information is true and correct, and consent to having St. Bernadette School collect personal information that may include further student information, birth certificate, legal guardianship, court orders and any similar information needed for application of registration. This information is required in order to apply to register your child and assist the school in making an informed decision as to your child's suitability and appropriate placement in the school. For more information, the privacy manager for St. Bernadette School is Mr. van der Pauw and may be reached at (604) 596-1101. A falsified application will not be considered for registration.

Both parents must sign the application form (except when legal documents state otherwise).

Signature _____ Signature _____ Date _____
(Mother) (Father)