



REGENT CHRISTIAN ACADEMY

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REVISED: November 8, 2016

Current Photo

2017 - 2018 APPLICATION FORM

OFFICE USE ONLY

Date Received:
Interview Date:
Accepted:
Reg Fee:
1st Month:
Siblings:
Referred by:

1. Student's full **legal name**:

First Name

Middle

Surname

2. Sex: Male Female

3. Grade Entering:

4. Parent/Guardian Name(s):

5. Address:

Street

City

Province

Postal Code

6. Home Phone:

Cell Phone:

7. Father/Guardian Email:

Mother/Guardian Email:

8. Birthdate: MM / DD / YYYY

9. Birthplace: City Province Country

10. The student is: a Canadian citizen a permanent resident on a student visa

Supporting documentation must accompany this application.

11. Primary language:

Secondary Language:

12. Church Attending:

13. Address:

14. Pastor's Name:

15. City:

16. List the student's last three schools and include the most recent report card.

School Name	Location	Date of Attend

17. Are you making an application for other children for the 2017-2018 school year?

If YES, please list name(s) and grade(s):

18. Is there currently an IEP (Individual Education Plan) or Learning Plan in place for your child/ren.

YES NO

If yes, complete documentation will be needed before acceptance is confirmed.

19. Does your child/ren have, or in the past had, special learning or behavioral needs which require(d) any educational support or assistance?

YES NO

If yes, complete documentation will be needed before acceptance is confirmed.

<input type="checkbox"/> I E P	<input type="checkbox"/> Behavior Plan	<input type="checkbox"/> Student Learning Plan	<input type="checkbox"/> ELL support <input type="checkbox"/> AIP	<input type="checkbox"/> Behavior, Occupational or Speech/ language therapists
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20. Please describe any academic, behavioral, or social difficulties your child may have.

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21. What extra curricular interests does your child have?

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22. Will your child be able to participate fully in physical education?

23. Why do you want your child/ren to attend Regent Christian Academy?

24. Father's

- Occupation:
- Place of Business:
- Home Email:
- Work Phone:

25. Mother's

- Occupation:
- Place of Business:
- Home Email:
- Work Phone:

26. Student lives with:

- father mother both guardian

27. Please provide custody documentation if applicable