

Application for School Admission (International Students)

Please submit completed application form to: isp@hcdsb.org

Personal information on this form is collected under the authority of the **Education Act**, R.S.O. 1990, c.E2. and will be used in the review and administration of the international student application. Questions about this collection may directed to: International Student Division, Halton Catholic District School Board, 905-632-6314 ext. 147 or 153 or isp@hcdsb.org

Choose the three schools of your choice. Placement in school is subject to availability of space in the school.

School(s) Requested:		
1.	2.	3.
Student Information:		
Last Name:	Given Name	English Name
Male Female Other	First language (Mother tongue)	Other Languages
Date of Birth:	Email address:	Grade applying to::
Is the student in good health and able to participate fully in their classes? Yes No If No, please explain:		
Please check any existing Medical Conditions: Heart Sight Hearing Speech Allergies Asthma Epilepsy Diabetes		
Does the student have a disability that requires special education support? Yes No If Yes, please specify needs:		
Does the student have any allergies or take any medication? Yes No If Yes, please describe:		
List any Life Threatening Allergies:		
Does the student have a perceived or documented: Learning Disability Physical Handicap Social Integration Difficulty Behavioral Concern History of Criminal Behavior If Yes, please describe:		
Has the student have been away from their family for long periods of time? Yes No If Yes, please explain:		
Has this student ever previously applied to HCDSB as an International student? Yes No If Yes, please explain:		
Education:		
Highest level, form, year or grade completed:		
Does the student presently attend school? Yes Level/Form/Grade No Completion date:		
Name of the current or last school attended:		Address of current or last school attended:
Current language of instruction:		
What are your academic goals		
Graduate from high school in Ontario		Return to school in my home country
Attend university/college in Canada		Develop English skills only

Parent/Guardian information (in Home Country)			
Father's Last Name:	Given Name:	Email Address:	Phone number:
Mother's Last Name:	Given Name:	Email Address:	Phone number:
Street address	Town City	Province/State	Country
			Postal Code

Parent/Guardian information (In Canada)			
Last Name:	Given Name:	Relationship to Student:	
Email address:	Cell number:	Home/Business number:	
Street address	Town City	Province/State	Country
			Postal Code

Homestay Provider information:			
Last Name:	Given Name:	Relationship to Student:	
Email address:	Cell number:	Home/Business number:	
Street address	Town City	Province/State	Country
			Postal Code

Payee Information	
<i>If a refund is required, it will be sent the person who has paid the fees.</i>	
Name	Address

Secondary School Program	
Full School Year (Sept – June)	Semester 2 (Feb – June)
Semester 1 (Sept – January)	Grade requested:

Elementary School Program	
All elementary students must apply for full year (Sept – June)	Baptismal Certificate: Yes No

All elementary students must be residing with a parent in Canada to be accepted at HCDSB.
 Placement in school is based on the local address of residence for the student and is subject to availability of space in the school. Change of address does not guarantee placement in a new home school. In the Ontario education system, a student is placed in a grade according to age. The Halton Catholic District School Board reserves the right to determine final school and grade placement.

 Parent/Guardian Signature

 Student Signature (if over 18 years of age)

 Date (YYYY/MM/DD)