North Cariboo Christian School



School Admission Package

Family & Student Forms

I. Family Information

Family Surname:	Application Date:				
Father's name:		Mother's name:			
Names and Ages of Childre	mes and Ages of Children in family:				
Home Phone Number:		Email:			
Home Address:					
		Postal Code:			
Father's Occupation:		Place of Employment:			
Work Phone Number:		Cell:			
Mother's Occupation:		Place of Employment:			
Work Phone Number:		Cell:			
If both parents do not hav	ve the same contac	ct information, please give the following additional			
information.					
Name: Home Phone Number:		Home Phone Number:			
Address:					
Student(s) live(s) with:□ f	ather 🗌 mother 🗀] both □ legal guardian □Other			
Has a court order been ma	ade concerning the	e care or custody of the student(s)? Yes No			
If yes, please attach a copy	y .				
Is there anyone we should	be aware of who	your child may not leave the school with?			
If so who?					



Do you understand the principle beliefs of the Christian faith? \square Yes $\ \square$ No
Would you identify \square your family/ \square a parent/ \square your child \square as being Christian? OR
☐ At this point, we are not sure.
Do you attend Church? 🗆 Yes 🗀 No Church name:
Have you applied to NCCS before? ☐ Yes ☐ No Date:
Do you have any outstanding debts with NCCS?
When are the best times for you and your family to attend an admission interview?
Circle all that work for you. Mon Tues Wed Thurs Fri Afternoons/Mornings
Please explain why you are interested in enrolling your child(ren) at NCCS.
If you have other school-aged children that will not be attending NCCS, please give a brief reason ting why.

Parent or Guardians Statement:

In completing this application, we understand and agree with the purposes of North Cariboo Christian School, and indicate that we are enrolling our child(ren) because of our earnest desire that he/she/they receive(s) a Christ-centered education. If our family is accepted by the school, we agree that our child(ren)'s education will be in harmony with the constitution and By-laws of the Society, the policies of the School Board, and we are entrusting the education of our child(ren) to the School, the Principal, and the Classroom Teacher. We have read and understand the NCCS Handbook for Parents and Students contained in the Admissions package.

Signature of Parent or Guardian

2876 Red Bluff Road, Quesnel, BC V2J 6C7 Phone (250) 747-4417 Fax: (250) 747-4410

www.nccschool.ca Email: office@nccschool.ca

II. Legal Residency of Parent/Guardian

1. I am (please [X] one);



To be completed and signed by a parent or legal (court-appointed) guardian. (if legal guardian, attach copy of court order appointing you as legal guardian)

		ture of Parent or Guardian:
Yc	our r	name: Date:
		Band # Non-Status: YES / NO
		Native Ancestry: Status: YES / NO
3.	ls c	one or both parents or guardians a Canadian citizen or landed immigrant?
Re	eside	ency address:
		n a resident of British Columbia (please [X] one): [] Yes [] No
]]	Other - document description:
[]	A person carrying out official duties as a diplomatic or consular official (with a foreign representative acceptance counterfoil in his/her passport)
		for one year but anticipated to be renewed for one or more additional years)
[]	Employment authorization (working permit) for two or more years (or issued
[]	Student authorization (student visa) for two or more years (or issue for one year but anticipated to be renewed for one or more additional years)
[]	A person claiming refugee status who has a letter of no objection
[]	Admission as a refugee claimant
[]	Lawfully admitted to Canada under one of the following documents (please mark the appropriate box and attach photocopy of document)
[]	A landed immigrant (attach photocopy of landed immigrant status card)
[]	A Canadian citizen (if not born in Canada, please attach photocopy of citizenship papers/card)

III. Tuition Payment Form



Fee Schedule

Tuition can be paid all at once, in ten monthly instalments, or other regular payment schedules that are passed by the office. Fees must be paid in a timely manner.

	For School Year 2023-2024				
Students attending NCCS	Tuition Equation	10 Payments	Yearly Total		
One	\$3,550	\$355	\$3,550		
Two	\$1,550	\$510	\$5,100		
Three or more	\$ 850	\$595	\$5,950 (family cap)		

We/I understand our/my financial commitment to pay tuition fees to North Cariboo Christian School. In the event that we/I cannot meet that commitment, we/I will immediately notify the Business Administrator in the school office. We/I have read and understand both the Tuition Payment and Delinquent Tuition Payment Policies.

Fuition total for this school year: \$
Tuition may be paid in the following ways:
On or before the 1 st of each month, September—June, payments may be made:
[] Automatic monthly or semi-monthly bank withdrawals.
[] By E-transfer to <u>e-transfer@nccschool.ca</u> with what the payment is for in the messag line.
[] At the office with cash**/cheque. If you opt to send payments with your child, please ca the office to confirm it has been received.
[] By mail with cheque or money order.
In advance, payments may be made:
[] Cash** or cheque for the full year or ½ year at a time
[] Ten post-dated cheques (dated for the 1 st of each month, September—June)

- * Tax receipts will be issued by February of each year, based on the previous school year. Tuition is up to 100% tax deductible. This percentage may vary from year to year.
- ** Cash amounts of \$3,000 or less will be accepted.

Signature

IV. Student Questionnaire



(To be filled out by all students entering **grades 7 and up**)

enough room, you may attach a separate s	heet.					
Name:	Grade:	Sex:	□м	□F		
Do you want to come to North Cariboo C Why or why not?						
2. What is your best subject in school?						
3. What is your hardest subject?						
4. What is your favorite subject?				,		
5. Do you plan to go on to post-secondary completing high school? ☐ Yes ☐ N	•	sity, colleg	ge, or te	echnical	school)	after
6. What type of career do you think you wi	ll go into after gra	duating? _				
7. Do you have a part-time job?			Yes		No	
8. Do you go to church regularly?			Yes		No	
9. Are you involved in activities at your chu	rch?		Yes		No	
If yes, please give details:						
10. Do you have a personal relationship wit	h Jesus Christ?] Yes] No	
11. Are you willing to abide by the NCCS Stu	ident Code of Con	duct and t	the NC	CS Dres	s Code in	cluded in
this package?] Yes] No	
Signed:	Da	ate:				

The following questions are to be answered by the student in their own handwriting. If there is not



V. Student Information

Please complete one form for <u>each</u> student you wish to register at NCCS.

Student name:	
Grade applied for: Dat	te of admission requested:
Date of Birth:	Place of Birth:
Native Ancestry:	Status: YES / NO
Band #	Non-Status: YES / NO
Please list your child's extracurricular a	ctivities, interests and hobbies (ie: soccer, piano, etc)
Is there anything else you wish to tell the	

VI. Academic History

(Please complete <u>all</u> areas which apply to your child)



1. Schools attended: List the last three schools, starting with the most recent:

	SCHOOL & LOCATION	<u>DATES ATTENDED</u>	
i) _			
ii) _			
iii) _			
2. Plea	se include a copy of the most rec	ent reports issued by the school presently atte	nding.
3. Do yo	ou have any concerns regarding y	our child's academic progress or placement? If	so
explain.			
			
4. Please	e provide contact number & nam	es of your child's most recent teacher & princip	oal.
Principa	l Name:	School Contact Number:	
Child's C	lassroom Teachers' Name:		
5. Has y	our child ever been expelled fror	n their school program due to disciplinary issue	es?
6. Pleas	e indicate any social problems yo	our child may have experienced in school.	

7. Please indicate with an "x" whether or not your child has been seen/referred to any of the following:



	YES	N	NO	
			School district learning assistance teacher or counsellor	
			Speech/language pathologist	
			Occupational therapist	
			Physiotherapist	
			Mental Health	
			Child Development Center	
			Children's Hospital	
			Gateway Centre	
			Sunnyhill Hospital	
			Other (who/where)?	
			or any of the above checked "yes" (ie. Reasons referred, length of time	e therapy
-			ly receiving classroom support? Yes No	
			supported or in a group setting?	
c) For v	what su	bject area	as?	
d) Doe	s your c	hild receiv	ive additional funding to support their learning needs?	

Medical Information cont.

Date: _____



Does your child have any of the following? (Please check) Diabetes ____ Hearing Problems ____ Asthma ____ Seizures Vision Problems ____ Allergies ____ Heart Condition ____ Contact Lenses ____ Inhaler _____ Epilepsy _____ Please specify allergy: Mild or severe? Give details. Please explain briefly above conditions: Other: Is your child on medication? Name of medication: Does your child require medication to be given **during** the school day? \square Yes \square No Is your child able to participate in a full PE program? If "no", an exemption note from your family physician will be required as PE is a mandatory subject at all grade levels. If conditions change throughout the school year, please inform the school. Are your child's immunizations up to date? \square Yes \square No If yes, please attach a copy of immunizations or fill in the dates of all past immunizations below: DPTP-Hib MMR Hepatitis B Diphtheria, Pertussis, Tetanus, Measles, Mumps, Rubella Polio, Haemophilus Influenza Booster 3. _____ Booster _____ This form was completed by: Name/Relationship: _____

North Cariboo Christian School



School Admission Package

Family & Student Forms

VIII. Character Reference Form

I am a:	e
Church Address: Ph #: Email: How long have you known the student or family? Circle the words which best describe this student: Olerant Spiritual Loud Follower Flexible Troubled Articulate Organized Meek Careless Dramatic Lethargic Humble Quiet Organized Shy Neat Sociable Forgiving Cheerful Responsite Studious Sincere Studious Open Loving Devoted Procrastic	e
Church Address: Ph #: Email: How long have you known the student or family? Circle the words which best describe this student: Folerant Spiritual Loud Follower Flexible Troubled Articulate Organized Meek Careless Dramatic Lethargic Humble Quiet Fender Shy Neat Sociable Forgiving Cheerful Responsi Rebellious Sincere Studious Open Loving Devoted Procrasti	e
Circle the words which best describe this student: Dierant Spiritual Loud Follower Flexible Troubled Articulate rganized Meek Careless Dramatic Lethargic Humble Quiet ender Shy Neat Sociable Forgiving Cheerful Responsi ebellious Sincere Studious Open Loving Devoted Procrasti	e
Circle the words which best describe this student: Ierant	e
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ristian Commitment	
ndership	
Indicate any special talents, skills, or leadership qualities you have observed:	

Please give this form to two references to fill out and fax or email directly to NCCS -Fax: 250-747-4410 or Email: office@nccschool.ca



Did you remember to include...

files):
☐ School Admission Forms Package
🖵 \$100 Registration Fee
We also require the following information, where applicable,
to accompany your completed application forms (photocopies can be made at th school):
A copy of your child's last report card
Documentation of student IEPs, support received, assessments

The following forms (you should keep the handbook and other information pages for your

The interview will take approximately 45 minutes to an hour. We ask you to bring your child(ren) applying to NCCS so we can meet your family. The interview panel generally consists of 3-4 people including the Principal, the child's Classroom Teacher(s), the Student Support Director where applicable, and an Admissions Committee Member.

Thank you again, and we look forward to meeting with you soon!

Give them more
than an education
Give them a **foundation**for living