



INTERNATIONAL STUDENT APPLICATION FORM

2016-2017

Student Information				
Last Name	First Name	Middle Name	Age	Date of Birth (dd/mm/yyyy)
Country of Origin	Entering Grade	Enrolment to begin (dd/mm/yyyy)	Gender	
			<input type="checkbox"/> Male <input type="checkbox"/> Female	
Homestay Contact Information (Office Use)				
Name		Phone	Cell	
Address		Email	Other Info	
Home Address		Mailing Address		
Apartment Number	Street address	PO Box Number	Other	
City/ Town	Postal Code	City/ Town	Postal Code	
Family Information				
Father's Last Name	Father's First Name	Lives with student	Occupation	Employer
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Mother's Last Name	Mother's First Name	Lives with student	Occupation	Employer
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Contact Information				
International #	Canadian #	Custodian #	Emergency #	Other #
Primary Email Address		Secondary Email Address		No Email Address
				<input type="checkbox"/>
Name of Emergency Contact (If custodian unavailable)		Emergency Contact Phone #		Cell #

45 Chapman Drive
Sussex, NB
E4E 1M4

T 506.433.4005
E info@sussexchristianschool.ca
W www.sussexchristianschool.ca



Are there special instructions to be noted regarding custody of students? Yes No

If "Yes", please specify:

School Information

Last School Attended	Last Grade	Contact Person at School	School Phone #

Give reason why student is leaving previous school and has chosen to attend Sussex Christian School

Optional Information

Church Attending

Describe your relationship to the Lord Jesus Christ

Additional Documentation

Please complete the following forms and submit: (available from web-site)

One per family

Parental Understanding and Commitment / Financial Commitment Form

One per student enrolling

Medical form

School Permission Form

The following supporting documentation is required

Academic Report Card – from previous 2 years of formal schooling, in English

Copy of passport

Legal Guardian documentation (if applicable)

Copy of visa once official acceptance has been granted

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SUSSEX CHRISTIAN SCHOOL PARENTAL UNDERSTANDING AND COMMITMENT FORM



We understand that a basic responsibility of Christian parents is to “train up a child in the way he should go...that when he is old he will not depart from it.” (Proverbs 22:6). Sussex Christian School is a school seeking to mold your children’s lives after God’s fashion. Successful Christian living hinges on three areas: the home, the church, and the school. These institutions must work cooperatively together. Parents should not give their responsibility to the Christian school and let them train the children alone. Both the home and the school share this responsibility. Therefore, as parents we pledge to do our part and enter into covenant with SCS.

- It is my choice as a parent that my child have an academic education based on the Word of God and its teachings.
- I understand that Sussex Christian School is a ministry of Sussex Wesleyan Church and that the church’s doctrinal position on the Word of God will be reflected in all affairs of the school.
- I believe it is in the best interests of the school and the children that parents express a positive attitude toward the goals, aims, and standards of the school. Should a problem or misunderstanding arise, I will immediately seek to resolve it privately with the administration.
- I agree to uphold and support the high academic standard of the school by providing a proper atmosphere for my child to study and to give my child encouragement in the completion of any homework or assignments.
- I appreciate the standards of the school and will not tolerate profanity, obscenity in word or action, dishonour to the Lord or the Word of God, or disrespect toward the personnel of the school.
- I have read the Sussex Christian School Student/Parent Handbook and agree with the school's outlook and aims. I fully approve of the STANDARD OF CONDUCT for students and the DRESS CODE and agree to support all regulations of the school made in the applicant’s behalf and authorize this school to employ such discipline as is deemed wise and expedient for the training of my child.
- I commit myself to promptly pay my financial obligations to the school, understanding that REGISTRATION FEE and at least half of the TUITION are payable in advance.
- I understand that the school reserves the right to dismiss any child who fails to comply with the established regulations and discipline or whose financial obligations are not met.
- I understand that the staff of Sussex Christian School will treat my child with love and respect and are committed to providing the best possible academic instruction.

FINANCIAL INFORMATION 2015-16

Registration Fee: (Per student. Non-refundable)	\$100	My financial commitment:	
Tuition Fees: (One half due with application. Refundable only if immigration application is denied.) Rates below for Grades 3-12		Registration Fee(s): (\$100 x # students)	\$ _____
Fees	First Child	Second Child	Tuition
Tuition	\$10000	\$8825	1 st Child \$ _____ 2 nd Child & subsequent (\$8825 x # students) \$ _____
			TOTAL \$ _____

Signature of Father/Guardian	Signature of Mother/Guardian
Date	Date

MEDICAL INFORMATION

One copy of this page to be completed for each student being enrolled

Child's full name

Local Physician's Name (If applicable)

Insurance Company Name

Insurance Policy Number

Does applicant have any mental, emotional, physical limitations, or learning disabilities that may affect his/her activities or progress, or for some reason should be known by his/her teachers?

Please specify if your child has any allergies.

Specify if your child requires regular medication to be administered at school

NOTE: If medication is required on a regular basis, or at a specified time, medication must be brought to the school office, labeled with child's name and dosage requirements, and a medical permission form must be completed.

Permission to receive medication

By signing this form I understand that Sussex Christian School is not responsible for any injury or harm that may occur as a result of this medication. Sussex Christian School reserves the right to revoke this privilege if it is being abused (constant use of pain medication, etc.).

In order to receive pain medication, students must check with their Home Room teacher before coming to the school office for such medication.

My child will be permitted to be given the following pain medication(s) during school hours if necessary, understanding that this does not mean they are allowed to abuse this privilege. (Please check all allowable ones)

- Aspirin (ASA) Tylenol (Acetaminophen) Advil (Ibuprophen)
 My child is not permitted to receive any pain medications

Parent Signature

Emergency Medical Treatment

I hereby authorize Sussex Christian School to call an emergency ambulance in case of accident or acute illness, and to arrange for necessary emergency medical aid and surgical care in the case that I, or the designated guardian, am not immediately available. Any qualified physician, called by SCS, may treat and do whatever is necessary for the health and well-being of my child.

It is understood that a conscientious effort must be made to notify me before such action will be taken. I also agree to accept responsibility for the cost of above medical services.

Parent Signature

Date

SCHOOL PERMISSION FORM

One copy of this page to be completed for each student being enrolled

Student's FULL Name

Grade

School Sponsored Events off School Property

Yes No I give permission for my child to take part in all school activities, including sports and school sponsored trips away from the school's premises. I absolve Sussex Christian School and Sussex Wesleyan Church from liability to me or my child because of any injury to my child at school or during any school activity.

Parent Signature

Publishing Photos

Yes No I give permission for my child's photo to be published in print media.

Yes No I give permission for my child's photo to be published on school website and/ or Face Book page.

Yes No I give permission for my child's photo to be published in video media (for such things as school dramas, etc.)

Parent Signature

Cell Phones/ Electronics

SCS does not allow students to have cell phones or other electronics on their person or in their bookbags or lockers during the school day. If a parent feels that it is necessary for the student to carry a cell phone, it must be turned into the school office at the beginning of the school day. If a student is leaving the school grounds at lunch time, they may pick their phone up from the office before they leave and return it to the school office after lunch.

Please check one

My child does not carry a cell phone

My child does carry a cell phone. I understand that when it is brought to school, it will be signed into the school office for the school day, and may be signed out at lunch time if s/he is leaving the school grounds.

Parent Signature

Jr/Sr High Permission to Leave School Property

By signing this form I understand that Sussex Christian School is not responsible for any injury or harm that may occur off school property during the designated lunchtime. Sussex Christian School reserves the right to revoke this privilege if it is being abused (constant tardiness, etc.).

Yes No My child will be permitted to leave SCS grounds during the designated noon hour. This does not mean they are allowed to leave school grounds at other times during the day (breaks, etc.)

Yes No My child will be permitted to leave school grounds at noon hour in a car driven by a teenage driver?

Yes No I have discussed this with my child.

Parent Signature

Students in Grades 7-12 must sign the following:

I recognize that SCS is a Biblically-based Christian school working in cooperation with parents. I agree to abide by the rules of the school as set forth in the student handbook. I understand that as a student of SCS I am to refrain from profane and vulgar language, the use of tobacco, alcohol and illegal drugs, and sexual activity, and that failure to do so could be cause for my dismissal from SCS. I also agree to respect and support the authority under which I am placed as a student at SCS.

Student Signature