



# ST. BONAVENTURE'S COLLEGE

<b>For School Use Only</b>	
Date rec'd	_____
Appl. Fee	_____
Interview	_____

## NEW STUDENTS GRADES 1-12 APPLICATION FORM

**A \$150 non-refundable application fee is required with this form. Enclose a copy of the student's latest school records. You will be contacted for an interview.**

### Section A: General Information

Male  Female  Name of Applicant in Full: \_\_\_\_\_  
Surname                      First Name                      Middle Name/Initial

Date of Birth: \_\_\_\_\_ Present Age: \_\_\_\_\_ For what grade: \_\_\_\_\_ For what year: \_\_\_\_\_  
Month/Day/Year

MCP Number \_\_\_\_\_ Religion: \_\_\_\_\_

School(s) previously attended and time spent in each \_\_\_\_\_

<i>(Please circle one)</i>	Mother/Guardian			Father/Guardian	
	Mrs.	Ms.	Dr.	Mr.	Dr.
<b>Surname</b>					
<b>First Name</b>					
<b>Street Address</b>					
<b>City</b>					
<b>Province</b>					
<b>Postal Code</b>					
<b>Phone</b>	Home	Work		Home	Work
<b>Cell</b>					
<b>E-mail</b>					
<b>Student lives with (please check)</b>					

Does your child require any special services? Yes  No

If yes, please explain \_\_\_\_\_

Does your child have any health issues? Yes  No

If yes, please explain \_\_\_\_\_

**Section A (continued)**

**Siblings:**

**(Please check one)**

<b>Name</b>	<b>Grade</b>	<b>Attending</b>	<b>Applying</b>

**DATE:** \_\_\_\_\_  
**Month/Day/Year**

**Signature:** \_\_\_\_\_  
**Parent/Guardian**

**All information submitted on this form is for school use only and will not be distributed to any third party.**