



ST. BONAVENTURE'S COLLEGE

For School Use Only	
Date rec'd	_____
Appl. Fee	_____
Interview	_____

NEW STUDENTS GRADES 1-12 APPLICATION FORM

A \$225 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.
Surname					
First Name					
Street Address					
City					
Province					
Postal Code					
Phone	Home	Work		Home	Work
Cell					
E-mail					
Student lives with (please check)					

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)

Name	Grade	Attending	Applying

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.