

ISLAND CATHOLIC SCHOOLS

INTERNATIONAL PROGRAM APPLICATION



ISLAND CATHOLIC SCHOOLS



1-4044 Nelthorpe St.
Victoria, BC Canada
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TEL: 250-727-6893
www.cisdv.bc.ca

APPLICATION FOR INTERNATIONAL ADMITTANCE

ST. ANDREW'S REGIONAL HIGH SCHOOL

Please attach student
photo
(passport size)

(FOR OFFICE USE ONLY)

School year applying for: _____

Current grade: _____ Grade applying for: _____

Length of study: 1 Semester 1 Year 1+ Years

Graduating in BC: Yes No

Name of agency helping with application (if applicable): _____

Date received: _____

Interview date: _____

Accepted: Yes No

Wait list: Yes No

Date: _____

International Director's
Signature: _____

STUDENT INFORMATION

Family Name: _____

Gender: Male Female

Legal First Name: _____

Canadian Name (if any): _____

Birth Date (d/m/y): _____

Passport Number: _____

Home Address: _____

City: _____

Postal/Zip Code: _____

Country: _____

Nationality: _____

Student's

First Language Spoken at Home: _____

Email Address: _____

* **PLEASE NOTE:** All students **MUST** obtain a **LOCAL** phone number/cellphone plan upon arrival in Victoria

PARENTAL CUSTODY IN HOME COUNTRY

Both Parents Mother Father Other (please specify): _____

Is there legal documentation in the case of custody or restricted access by the non-custodial parent?

Yes (If "Yes," please send documentation to the office) No

CUSTODY IN CANADA

* **PLEASE NOTE:** Citizenship and Immigration Canada (CIC) **requires** that each student have a custodian (guardian) in the community who is a Canadian citizen OR a permanent resident of Canada.

Island Catholic Schools is willing to accept this responsibility should you wish (a one-time fee required).

Yes, I want ICS to be the custodian for my child (type Parental name): _____

No, I will be in Canada with my child OR I have arranged for an adult custodian/guardian for my child, as follows:

Family Name: _____

First Name: _____

Home Address: _____

City: _____

Postal Code: _____ Province: _____

Home Phone: _____

Cell Phone: _____

Work number: _____

Email Address: _____

Occupation: _____

Relationship with student: _____

PARENTAL CONTACT INFORMATION

PARENT/GUARDIAN INFORMATION

Mother Father
 Other (please specify): _____
Family Name: _____
First Name: _____
Birth Date (d/m/y): _____
Nationality: _____
Home Address (If NOT living with student):

City: _____
Country: _____
Postal/Zip Code: _____
Home/Cell Phone: _____
Work Phone: _____
Email Address: _____
Occupation: _____
Above information can be used for emergency contact:
 Yes No

PARENT/GUARDIAN INFORMATION

Mother Father
 Other (please specify): _____
Family Name: _____
First Name: _____
Birth Date (d/m/y): _____
Nationality: _____
Home Address (If NOT living with student):

City: _____
Country: _____
Postal/Zip Code: _____
Home/Cell Phone: _____
Work Phone: _____
Email Address: _____
Occupation: _____
Above information can be used for emergency contact:
 Yes No

EMERGENCY CONTACT (OTHER THAN PARENT/GUARDIAN)

Family Name: _____
First Name: _____
Relationship to student: _____
Home Address: _____
City: _____ Post Code: _____
Country: _____
Home/Cell Phone: _____
Work Phone: _____
Email Address: _____
Occupation: _____
Can this person pick up the student?
 Yes No

Family Name: _____
First Name: _____
Relationship to student: _____
Home Address: _____
City: _____ Post Code: _____
Country: _____
Home/Cell Phone: _____
Work Phone: _____
Email Address: _____
Occupation: _____
Can this person pick up the student?
 Yes No

MEDICAL INFORMATION

List any **life threatening health conditions** (diabetes, heart condition, anaphylaxis or severe allergies, asthma, epilepsy, etc.)

In an emergency, you may send my child to the hospital: Yes No

MEDICATIONS

School staff will give or supervise students taking medications under the following conditions:

1. They are required in emergency situations, or
2. They are required for one month or longer and **MUST** be given during school hours.

* **PLEASE NOTE:** The Director of International Education **MUST** be informed of any specific instructions for medication.

ALLERGIES

Do you have any allergies? Yes No

Food allergies (please also identify if it is airborne and/or anaphylactic)

- | | | | |
|----------|-----------------------------------|--------------------------------|-----------------------------------|
| 1. _____ | <input type="checkbox"/> Ingested | <input type="checkbox"/> Touch | <input type="checkbox"/> Airborne |
| 2. _____ | <input type="checkbox"/> Ingested | <input type="checkbox"/> Touch | <input type="checkbox"/> Airborne |

Medication

1. _____
2. _____

Environmental (please describe the allergic reactions)

- | | |
|----------|--------------------|
| 1. _____ | Description: _____ |
| 2. _____ | Description: _____ |

Does your child take any medication on a regular basis? Yes No

If "yes," please describe:

PHYSICAL HEALTH CONDITIONS

Please identify any physical health conditions or limitations that may affect participation of a full education program:

- | | | |
|--|---|---|
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Diabetes | <input type="checkbox"/> Digestive Troubles |
| <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Frequent Headaches | <input type="checkbox"/> Hearing Impairment |
| <input type="checkbox"/> Heart Condition | <input type="checkbox"/> Visual Impairment | <input type="checkbox"/> Skin disorder |

Other (please describe):

MENTAL / EMOTIONAL CONDITIONS

Please identify any mental and/or emotional health conditions or limitations:

- Anxiety Depression Eating Disorders
 Obsessive/Compulsive Disorder Severe Mood Swings

Other (please describe):

IDENTIFIED LEARNING DISABILITIES

Please identify any learning needs identified:

- ADD / ADHD Dyslexia Dyscalculia

Other (please describe):

* **PLEASE NOTE:** All students are **REQUIRED** to purchase **medical insurance**, as arranged by the ICS International Students Program.

ACADEMIC HIGH SCHOOL PROGRAM

If your school requires you to take specific courses while in Canada, please list them below:

REQUIRED COURSES

This section is for students who are **planning to graduate** from a British Columbia High School. In order to graduate from a British Columbia high school, students are required to take the following courses.

Humanities

- English 10,11 &12
- Social Studies 10, & 11 or 12

Science&Math

- Math 10, & 11 or 12
- Science 10, & 11 or 12

Fine Arts/ADST

- Any 4 credit course in Arts Education and/or an applied design, skills and technology

Other

- Career-Life Education
- Career-Life Connections
- Physical Education 10

ELECTIVE COURSES

Students are also required to take elective courses (minimum of 28 credits for graduation) that match their personal needs and interests. While effort will be made to accommodate personal interests, we cannot guarantee elective course availability or placement. Please check areas of interest to you:

- | <u>Humanities</u> | <u>Fine Arts, Applied Design, Skills and Technology</u> | <u>Other</u> |
|---|---|--|
| <input type="checkbox"/> ESL/ELD | <input type="checkbox"/> Theatre (Musical Performance) | <input type="checkbox"/> Career-Life Education |
| <input type="checkbox"/> French | <input type="checkbox"/> Theatre Production | <input type="checkbox"/> Career-Life Connections |
| <input type="checkbox"/> Spanish | <input type="checkbox"/> Drama/Acting | <input type="checkbox"/> Physical Education 11 |
| <input type="checkbox"/> Law | <input type="checkbox"/> Choir | <input type="checkbox"/> Outdoor Education |
| <input type="checkbox"/> Psychology | <input type="checkbox"/> Jazz Band | <input type="checkbox"/> Fitness/Conditioning |
| <input type="checkbox"/> Religion | <input type="checkbox"/> Concert Band | <input type="checkbox"/> Yoga |
| <input type="checkbox"/> History | | |
| <input type="checkbox"/> Physical Geography | | |

LEGALIZATION OF MARKS

Depending on the home country, **some students may need their Canadian Marks legalized** upon completion of their ICS International Program. Will you need your marks legalized?

- Yes (**PLEASE NOTE:** The family will be responsible for the extra cost of these services)
- No

ENGLISH SKILLS

Please write if you have received any International English testing/training (TESL, TOEFL, etc): _____

What grade did you receive? _____

How long have you studied English? _____

- | | | | |
|---|-----------------------------------|---------------------------------------|-----------------------------------|
| My English written skills are: | <input type="checkbox"/> Beginner | <input type="checkbox"/> Intermediate | <input type="checkbox"/> Advanced |
| My English reading skills are: | <input type="checkbox"/> Beginner | <input type="checkbox"/> Intermediate | <input type="checkbox"/> Advanced |
| My English listening skills are: | <input type="checkbox"/> Beginner | <input type="checkbox"/> Intermediate | <input type="checkbox"/> Advanced |
| My English speaking skills are: | <input type="checkbox"/> Beginner | <input type="checkbox"/> Intermediate | <input type="checkbox"/> Advanced |

GENERAL INFORMATION

ATHLETICS

Do you play any sports?

Yes

No

Sport: _____

How long: _____

Sport: _____

How long: _____

Are there any sports you would like to try?

MUSIC / DRAMA

Do you like acting / performing in front of people?

Yes

No

Do you like to sing?

Yes

No

Do you play any musical instruments?

Yes

No

Instrument: _____

How long: _____

Instrument: _____

How long: _____

Can you read music?

Yes

No

Are there any instruments or other performing arts you would like to try?

PERSONAL INFORMATION

Describe your personality (check all that apply)

Shy

Outgoing

Organized

Disorganized

Like to talk

Quiet

Like to be active

Like to study

Don't worry too much

Easily worries

Independent

Friendly

What hobbies and interests do you like to take part in outside of school?

What kind of music do you prefer listening to (if any)?

What kinds of films/TV do you enjoy watching?

What kind of books / magazines do you like to read?

Approximately how much time do you spend on social media/gaming/watching TV/surfing the internet?

Have you ever travelled or studied in another country before? For how long?

APPLICATION LETTERS AND PHOTOS

STUDENT APPLICATION LETTER

Please attach a short letter (200-500 words) of introduction:

- What has prompted you to study with us here in Canada, at Island Catholic Schools
- Describe yourself and your interests
- Describe the goals that you have set for yourself and your expectations regarding your stay

PARENT(S) APPLICATION LETTER

Your child is taking a big step in leaving home to study abroad. Success in this endeavor requires maturity, a positive attitude, and a willingness to embrace another culture. Most importantly, though, your child needs your full and unconditional support. Please attach a short letter (200-500 words) describing your family, your child's personality and character at home, as well as your goals and expectations for him/her while studying with us in Canada.

STUDENT AND FAMILY PHOTOS

Please include 3-5 family photos of you, your family, and any activities you enjoy doing.

APPLICATION FEE METHOD

This non-refundable fee is for the application only and is required at the time of application. Each individual student application is \$250 CDN.

- * **PLEASE NOTE:** Completion of this form and payment of the application fee **DOES NOT GUARANTEE** automatic acceptance to St. Andrew's Regional High School. **Acceptance is subject to space and availability.**

CREDIT CARD

Please select:

VISA

MasterCard

Cardholder's Name (as it appears on the card): _____

Credit Card Number: _____

Expiry Date (as it appears on the card): _____ CVC (3 digit code on back of card): _____

I agree to a payment of \$250 CDN (please type name): _____

CHEQUE, DRAFT, OR WIRE TRANSFER

Cheque or Bank Draft (payable to Island Catholic Schools)

Wire Transfer

REFUND POLICIES

Please refer to the Student/Parent Tuition Fee schedule (<https://www.standrewshigh.ca/fee-schedule.php>) for refund policies, as well as additional terms and conditions.

ICS INTERNATIONAL SCHOOL PROGRAM

Please tell us how you found out about our program. Check all that apply.

- | | | |
|--|---|---|
| <input type="checkbox"/> Canadian embassy / consulate | <input type="checkbox"/> Education Fair | <input type="checkbox"/> Friend or family |
| <input type="checkbox"/> ICS Website | <input type="checkbox"/> Sibling has attended ICS | |
| <input type="checkbox"/> Other (please indicate the name): _____ | | |

HOMESTAY REQUEST

- Yes, I will require a homestay, provided by ICS (please continue to next page for completion)
- No, I have made other arrangements (parents, relatives, other homestay).

COMPLETION OF APPLICATION FORM

Thank you kindly for completing the ICS International Student Program Application. If you do not require a homestay, please save this PDF document and email to Michael Durkan at mdurkan@cisdv.bc.ca.

For any further information, please visit the [St. Andrew's Regional High School](#) or [Island Catholic Schools](#) websites or email mdurkan@cisdv.bc.ca.

May God's blessings be with you.

Michael Durkan

Michael Durkan
Director of International Education
Island Catholic Schools

REQUEST FOR HOMESTAY PLACEMENT THROUGH ISLAND CATHOLIC SCHOOLS INTERNATIONAL PROGRAM

In addition to the information you have provided in the student application, please look through the following criteria to help us secure a suitable homestay.

PREFERENCES

FAMILY / LIFESTYLE PREFERENCES (CHECK ALL THAT APPLY):

- | | | |
|--|---|---|
| <input type="checkbox"/> Prefer young children at home | <input type="checkbox"/> Prefer no other children | <input type="checkbox"/> Prefer a quiet home |
| <input type="checkbox"/> Prefer an active family | <input type="checkbox"/> Pets in home are ok | <input type="checkbox"/> Single-parent family is ok |
| <input type="checkbox"/> Grandparents in the home are ok | | |

FOOD

Food preferences (check all that apply):

- | | | |
|---|---|---|
| <input type="checkbox"/> Concerned about weight | <input type="checkbox"/> Enjoy eating new foods | <input type="checkbox"/> Enjoy eating healthy foods |
| <input type="checkbox"/> Eat small amounts | <input type="checkbox"/> Eat large amounts | |

What are your favourite foods?

What are your least favourite foods?

Do you know how to cook? No Yes

What are your favourite foods to cook?

Please list any dietary restrictions for health reasons:

OTHER

Do you have any pets at home? No Yes

What types of pets do you have?

Do you attend church/religious services regularly? No Yes

What religion do you follow, if any? _____

Do you have any brothers or sisters?

Sibling name: _____

Sibling name: _____

Sibling name: _____

Do you have a curfew in your home country? No Yes

Please describe your curfew:

Do you help at home with household chores? No Yes

Which chores do you do?

Have you ever lived away from home for longer than 6 months? If so, where, how long, and with whom?

Please provide any additional information, not included in either the **Homestay Information** or the **Island Catholic Schools Application Forms**, that may help with the homestay selection:

HOMESTAY PAYMENT INFORMATION

In most cases, homestay fees will be listed in the tuition invoice and are expected to be paid in full before arriving in Canada. Island Catholic Schools will transfer monthly payments directly to host families on your behalf. Homestay fees can be found on the website under the fee schedule.