

APPLICATION FORM

1

Student Details

Student Last Name	Student First Name		
Date of Birth (DD/MM/YYYY) Male Female	Non-binary Pronouns		
Legal Last Name	Legal First Name		
Preferred Last Name	Preferred First Name		
Primary language spoken at home Other language(s	s) spoken		
Current Grade Grade Applying For			
Required Supporting Doo	cumentation		
	ee. Please call (604)985-5224 to provide your credit card information		
Completed and signed Application Copy of student's Birth Certificate			
	current school year and previous two school years) Copy of		
PsychoEducational Assessment (dated within the last three years)			
Original diagnosis of ADHD if applicable (must be the original)			
Copy of the most current Individual Education Plan (IEP)			
Copies of additional external community support reports (dated within the last three years)			
☐ Original copy of ASD assessment	if applicable (must be the original)		

Instructions

Download, open and save this Application Form to your computer prior to completing. Once completed, sign and email your complete Application Form, along with the required supporting documentation (listed below) in one email correspondence to admissions@kgms.ca.

Please be sure to include "your child's name and Admissions Application" in the subject line. For example, Jayme Smith Admissions Application.



APPLICATION FORM

Student Profile

Students learn best when their learning differences are understood and supported. Please help us understand your child so that we can fully assess how to support their individual academic, social and emotional needs.

1. School History (include current schooling; indicate if the student is being homeschooled) Name of School Attended Grade(s)Attended From(MM/YYYY) To (MM/YYYY) Current **Sibling Information** Sibling Name DOB (MM/YYYY) School Attending Canadian Residency Status Canadian Citizen Other* Student Parent/Guardian 1 Social Worker *Please provide details: **BC** Residency Status Do the parents/guardians currently reside in British Columbia? First Nations & Residency Does the student identify as First Nations? If Yes, is the student currently living on Reserve? If on Reserve, which First Nation?



Parent / Guardian Information

Parent / Guardiar	n 1
Title(Optional)	Relationship
	Guardian 1 Guardian 2 Other - please specify:
Last Name	First Name
Email	Preferred Phone
Full Mailing Address (including postal code)
Job Title	Employer / Business Name
	Self-Employed (complete fields to the left as well)
Parent / Guardiar	1 2
Title (Optional)	Relationship
	Guardian 1 Guardian 2 Other - please specify:
Last Name	First Name
Email	Preferred Phone
Full Mailing Address (including postal code)
Job Title	Employer / Business Name
	Self-Employed (complete fields to
	the left as well)



How did you hear about Kenneth Gordon Maplewood School? (Check all that apply)

KGMS Website
Online search
Social media
Publication
Referring professional Other school
Personal recommendation from:
Other:
*Please expand on any answers in the boxes provided, including where you have answered 'Yes' to a question. <i>If space is insufficient, please add anothe sheet.</i> Student Profile
1. Has your child ever repeated a grade or delayed starting a grade? Yes No
2. Has your child ever received primary instruction in another language (e.g. French Immersion)?
3. Has your child ever been asked to withdraw from a school (temporarily or permanently), or missed school for an extended period of time? Yes No
4. Has your child received educational support (such as learning assistance or tutoring) either at, or outside of school? Yes No If yes, please specify provider's name, type of support, frequency and duration.



5. How would you describe your child?	
C. Hayy da yay haliaya Kamath Cardan Manlayyaad Cahaal aayld hala yayr ahild?	
6. How do you believe Kenneth Gordon Maplewood School could help your child?	
7 What do you ago so your shild's greatest assigl/parsonal strongths?	
7. What do you see as your child's greatest social/personal strengths?	
3. What do you see as your child's greatest communication strength?	



APPLICATION FORM

9. What do you see as your child's greatest academic strengths?
10. What do you see as your child's greatest social/personal stretches?
11. What do you see as your child's communication stretches?
12. What do you goo as your shild's goodomic stratches?
12. What do you see as your child's academic stretches?



13. Describe any history of learning difficulties in your extended family: reading, spelling, writing, math and/or attention.
14. How does your child interact with others? Please include any challenges in school settings, with peers, and/or at home <i>if applicable</i> .
15. Has your child experienced any emotional and/or mental health challenges? If so, please provide details.



6. Does your child have any chronic health and/or developmental concerns? If so, please provide details.				
17. Are there any other factors you would like us to consider regarding your child's application to Kenneth Gordon Maplewood School?				
I have included all pertinent documents				
I will forward all outstanding documentation				
*Please ensure that your child's name and Admissions Application is in the subject line				
Bursary Assistance				
We believe that all children and youth, regardless of economic situation, deserve an education in a setting where they can learn and prosper. Every year, KGMS provides access to limited bursaries. For further details, please contact the office at 604-985-5224.				
Please indicate if you anticipate applying for bursary assistance. Yes No				



Parent/Guardian Acknowledgement

By signing below, I/we acknowledge that I/we have read and understand that:

Acceptance: The \$150 admission application fee is non-refundable. This application does not automatically guarantee an admissions interview or automatically admit my/our child to Kenneth Gordon Maplewood School. Kenneth Gordon Maplewood School reserves the right to make a final decision as to whether to proceed with the Admissions process based on the school's assessment criteria.

Wait pool: If there is no space in the grade being applied to, and should the applicant be deemed by Kenneth Gordon Maplewood School to be a potential candidate for acceptance, I/we understand my/our child may be placed in a wait pool. It is understood that acceptance from the wait pool is based on best fit for the school, not first come, first served.

Contract: Should the child be accepted, it is understood that we will enter into a continuous enrollment contract with Kenneth Gordon Maplewood School and I/we will agree to pay all tuition and incidental fees as they become due in accordance with the contract.

Non-discrimination: Kenneth Gordon Maplewood School admits students of any race, colour, religion, ancestry, place of origin, sexual orientation, gender identity, or with any disability that can reasonably be accommodated by the school, to all rights, privileges, programs and activities generally accorded or made available to students of Kenneth Gordon Maplewood School. It does not discriminate on the basis of such factors in the administration of its admission, financial aid, educational, or employment policies.

Accuracy of information: All information in this Application Form and in any supporting documentation provided is true and up to date to the best of my/our knowledge. I/we have neither omitted nor embellished any facts relating to my/our child's application to Kenneth Gordon Maplewood School. I/we understand that if material information has been omitted from my/our child's application, Kenneth Gordon Maplewood School reserves the right to later withdraw an offer of acceptance or to terminate placement with continued obligation of tuition fees on me/us.

Privacy of information: Any information shared with Kenneth Gordon Maplewood School relating to my/our child's application is subject to Kenneth Gordon Maplewood School's Privacy Policy.

Custody arrangements: I/we have the right to make decisions about my/our child's education and that in submitting this application, I/we am/are not in breach of any custody arrangements or court order relating to my/our child.

Parent/Guardian 1 Name	Parent/Guardian 2 Name
Parent/Guardian 1 Signature	Parent/Guardian 2 Signature
Date (DD/MM/YYYY)	Date (DD/MM/YYYY)



Kenneth Gordon Maplewood School

Application Payment Form

By signing below, I/we acknowledge that I/we have read and understand that:

The \$150 admissions fee is non-refundable. This application does not automatically guarantee an admissions interview or automatically admit my/our child to Kenneth Gordon Maplewood School. Kenneth Gordon Maplewood School reserves the right to make a final decision as to whether to proceed with the Admissions process based on the school's criteria.

Date:		
Student Last Name:		
Student First Name:		
Admissions Fee Payment Information:		
Name on Visa/Mastercard:		
Card Number:	Expiry:	CCV:
Signature:		