

Northeastern Catholic District School Board

APPLICATION / ATTENDANCE AGREEMENT FOR THE ADMISSION OF STUDENTS OF PUBLIC SCHOOL SUPPORTERS

1. Parent(s) / Guardian(s)

	Religious Affiliation:			Church:			
	Spouse's Surname:	S	oouse's (Siven Name(s):			
	Spouse's Religious Affiliation:	S	Spouse's Church:				
	Address:	U	ity:				
	Your relationship to child(ren)/student(s	Postal Code: Telephone: Your relationship to child(ren)/student(s):					
	Tour rolationship to ormation, stadonia	<i></i>					
2.	Child(ren) / Student(s)						
	Student(s) for whom admission is requested:						
		Present School			Date of Birth Y / M / D		
	Surname / Given Name(s)	Present School					
3.	Reason for Application						
	Why do you want to enrol the student(s) in a Roman Catholic School? (Please make a statement and attach any information which you consider relevant.)						
	Can this reason be verified? Yes No How?						
4.	<u>Fees</u>						
	Secondary Open Access / Not applicate	ble					
5.	Do you agree to the student(s)' participation in the Religious & Family Life Education Classes? Yes No						
6.	Do you agree to the student(s)' particip school? Yes No	ation, in a suitable way, in the	e Religiou	s Life Activities and	d Celebrations of the		

PLEASE NOTE:

- 1. Non-Catholics, by law, are not eligible to direct their taxes to the Separate School Board. Persons who falsely declare themselves Roman Catholic and separate school supporters are subject, on conviction, to a fine.
- 2. If either spouse is Roman Catholic, including Ukrainian and Greek Rite Catholic, you are eligible to direct your taxes to the Separate School Board.
- 3. False statements will result in denial/withdrawal of approval to attend.

CONSENT TO CO	ONTACT	PREVIOUS	SCHOOL
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Reasor Studen eligibili	n(s) for Appl its of Public ty for admiss	ication. T School Su sion. Que	upporters" is collestions about this	(previous school) to verify the ation contained in the "Application/Attendance Agreement for the Admission of the ded under the authority of the Education Act and will be used to determine collection of personal information should be directed to the Freedom of Information, ON P4N 6M9; (705) 268-7443.
Date:	Year	Month	Day	Signature of Parent(s)/Guardian(s)

(+) (+) (+)

Northeastern Catholic District School Board

SCHOOL PRINCIPAL'S STATEMENT FOR THE ADMISSION OF STUDENTS OF PUBLIC SCHOOL SUPPORTERS

Surname:	· · · · · · · · · · · · · · · · · · ·
Address:Postal Code:	
Children / Student(s) Name(s):	
Placement (For the classes which the stude Teacher	Grade Enrolment
. <u>Verification of Reason(s)</u> Principals are expected to contact the previou	us school or other contact. Is there any information to assist us?
Interview Is there any information from the interview wh	nich would assist us?
Concerns Is there any concern arising from the application	ion, verification or interview which you wish to draw to our attention?
Principal's Recommendation	
upporters" is collected under the authority of the E	tion/Attendance Agreement for the Admission of Students of Public School Education Act and will be used to determine eligibility for admission. tion should be directed to the Freedom of Information Coordinator, 101 Spruce 43.
ate: Year Month Day	Principal's Signature

- FOR BOARD OFFICE USE -

	Application/Attendance has been approved. Application has been denied.	Signature of Superintendent or Designate			
Applican	ts may appear stating their reasons in writing when	Year an application has been	Month denied.	Day	
1- 7	Parent/Guardian Principal Supervisor of Accounting				