

SCHOOL DISTRICT NO. 27 (CARIBOO-CHILCOTIN)

350 North Second Avenue, Williams Lake, BC V2G 1Z9 Phone: 250-398-3811 Fax: 250-398-7871

APPLICATION FOR NON-RESIDENT OR INTERNATIONAL STUDENT

The Parents, Guardians And School Will Receive A Letter When The Application Has Been Approved.

THE STUDENTS <u>CANNOT</u> BE REGISTERED UNTIL APPROVAL HAS BEEN GRANTED.

Copies of <u>ALL</u> Documentation <u>MUST</u> Accompany Application

STUDENT INFORMATION: (Please P	rint In English)	
Student's Full Name:		Sex: Male F
Date of Birth:	Country of Birth:	
Date Student will Begin School:	Goi	ing into Grade:
School Student will be Attending (if known):		
English Skills Are: Beginner	Intermediate Advanced	
Documentation Provided (Student): Student	dy Permit Permanent Resident Card	Canadian Citizen Other:
PARENT INFORMATION: Living	with Parent(s) while in Canada: Yes	s No
_		Name:
-	·	Postal Code:
Home Telephone:	Fax:	
Email Address:		
Documentation Provided (Parent): (If Paren Work Permit Permanent Residen GUARDIAN INFORMATION:		Other:
Guardian's Full Name(s):		
•		
(Street)	(City)	(Postal Code)
Mailing Address: Same as Above OR:		
-	Alternate Num	ber:
Email Address:	rumentation issued by a Canadian Court	Tuition Paying
TUITION PAYING:	5 Months = \$6,500.00	10 Months = \$13,000.00
(Procedure and de	eadline for payment of tuition will be pro	vided in acceptance letter)
	10 Months	Months (\$)

Date

Signature of Parent/Guardian