TOUR DATE: _____

CANDIDATE

ADMISSIONS/ TOURS/ WAIT LIST

Candidate Information

Name of Student_____ Age _____
Last Name First Name Middle

Date of Birth _____ Country of Birth_____ Citizenship _____ Gender M/F
mm/dd/yyyy

Name of Student_____ Age _____
Last Name First Name Middle

Date of Birth _____ Country of Birth_____ Citizenship _____ Gender M/F

Name of Student_____ Age _____
Last Name First Name Middle

Date of Birth _____ Country of Birth_____ Citizenship _____ Gender M/F

Brief Information

Mother/Guardian Name: _____ Cell: _____
Email Address: _____

Home Address _____ City_____
Province _____ Country_____ Postal Code_____

Father/Guardian Name: _____ Cell: _____
Email Address: _____

Home Address _____ City_____
Province _____ Country_____ Postal Code_____

Does your child (ren) have any specific learning needs, behavioural needs, official diagnosis? Y☐ N☐

If Y (Yes) Please explain: Name of Child:_____

Interested Start Date: _____

Current school: _____ **Private/ French/ Public/ Daycare/ Other**

How did you hear about the Academy?

_____