

# REQUEST FOR ADMISSION—NON-RESIDENT



## IMPORTANT INFORMATION & INSTRUCTIONS

1. Student will not be admitted until this form is duly completed and returned to the principal.
2. Acceptance of non-resident students is contingent on availability of accommodation.
3. Request for admission must be renewed each year and is not guaranteed through previous enrolment.
4. Unacceptable behaviour or lack of effort will be sufficient cause for termination of non-resident privileges.
5. Tuition and transportation are responsibility of the home school division or band.
6. Order of completion: SECTION A, B, C

## SECTION A (to be completed by parent/legal guardian)

School requested:	School year (e.g. 2015/2016):	/	Grade:
Program: <input type="checkbox"/> Regular <input type="checkbox"/> Special Education <input type="checkbox"/> International Baccalaureate <input type="checkbox"/> French Immersion <input type="checkbox"/> German/Ukrainian <input type="checkbox"/> John G. Stewart <input type="checkbox"/> Vocational/Industrial (specify): <input type="checkbox"/> Other program (specify):			
Name of student (surname/given names):	Birthdate (dd/mm/yy): / /		
Name of parent(s)/legal guardian:	Relationship:	Phone #:	
Address of parent(s)/legal guardian:	City:	Prov:	Postal code:
Student will reside with:	Relationship:	Phone #:	
Address of student:	City:	Prov:	Postal code:
Last grade completed:	Last school attended:		
Name of home school division or band in which the student resides:			
Student status: <input type="checkbox"/> Canadian citizen <input type="checkbox"/> Visa student: Date visa expires (dd/mm/yy): <input type="checkbox"/> Other (specify):			
Signature of parent/legal guardian:	Date (dd/mm/yy):		

## SECTION B (to be completed by authorized officer of school division/funding agency or band)

I, the undersigned, certify that:

1. I am the signing officer of the school division/funding agency or band.
2. The parent(s) or the legal guardian of the applicant student reside(s) within the responsibility of the school division or band.
3. The school division or band accepts to pay residual costs of education.

School division or band:	Date (dd/mm/yy):
Mailing address:	City: Prov: Postal code:
Signature of authorized signing officer:	Name:
Reason student does not wish to attend school in home school division?	
Is the student currently expelled/suspended from any school division?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has the student been suspended from school during the previous 12 months?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the student require additional programming or support that would incur additional cost to River East Transcona School Division? (i.e. specialized equipment/Educational Assistant)	<input type="checkbox"/> Yes <input type="checkbox"/> No
If "yes" to any of the above, please explain.	

## SECTION C

This application is accepted:

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary-treasurer

**This application is to be forwarded to the secretary-treasurer at River East Transcona School Division, 589 Roch St., Winnipeg, Manitoba, R2K 2P7, Phone: 204.667.7130, Fax: 204.661.5618.**