



# St Joseph's School



## APPLICATION FOR ADMISSIONS



A member of Catholic Independent Schools  
Diocese of Prince George (School Authority # 116)

[cispg.ca](http://cispg.ca)





**St Joseph's School**

**2023-2024 Application for Admissions**

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Dear prospective families:

I am so excited that you have taken the time to enquire about admission to St Joseph's School! I look forward to getting to know you and your child or children. It is always exciting showing prospective families our amazing school, which I am so proud to have the privilege of leading.

St Joseph's School is a loving and caring learning community committed to academic excellence and fostering the growth of the whole child. Our work is infused by the teachings of Jesus Christ. The smaller size of our school nurtures a strong sense of community. Our dedicated staff and parents collaborate to inspire the growth of all children so they can become their best selves.

Here are just a few things that make our school shine:

- Religious education that focuses on Christian values
- A very experienced team of educators dedicated to helping all children learn and be well prepared on their learning journey
- A school culture that encourages learners to be safe, helpful, accountable, respectful and positive
- Use of the BC Ministry of Education's K – 7 curriculum
- French starting in the primary grades taught by specialist teachers
- Music instruction from K-7 taught by a specialist teacher
- Extracurricular sports and activities
- Delicious healthy hot lunch on Fridays
- A high staff to learner ratio
- After school care program (optional and open to everyone)
- School bus service (operated by BVCS)

I warmly invite you to reach out to me should you have any questions or would like more information. Thank you for your interest in our school!

Monique Vander Wart  
Principal

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**P:** 250 847 9414 **E:** [stj@cispg.ca](mailto:stj@cispg.ca) **W:** <http://stjosephsschool.ca/>  
**M:** Box 454, Smithers, BC V0J 2N0 | Wet'suwet'en traditional territory



Catholic Independent Schools Prince George (CISPG) Policy 501
Priorities for (Re) Admittance into CISPG Schools

- 1. Learners presently enrolled in the school.
2. Learners with siblings presently enrolled in the school.
3. Learners whose families are parishioners...
4. Learners, whose families are not practicing Catholics, but accept the goals and philosophy of the school...

Upon acceptance of application, the first month's tuition is required as a deposit for new families.

OFFICE USE ONLY
Application received (date: yyyy/mm/dd)
Application Package:
- Application and consent form
- Baptismal certificate (if applicable)
- Legal residency of parent
- CISPG family statement of commitment form
- Tuition commitment form
- Volunteer agreement
Application completed (date: yyyy/mm/dd)
Copies of additional documents:
- Child's official birth certificate
- Child's BC Services Card (Care Card)
- Parent/guardian's proof of BC residency
Additional documents (cont'd):
- Parent/guardian's immigration/citizenship/permanent resident documentation
- Copy of most recent report card
- Child's immunization records
- Special needs form completed
- Acceptance letter sent to parents
- First month's tuition deposit paid

\*Please note: Personal information other than address and full names can be redacted for privacy purposes.

Family name: \_\_\_\_\_ Applying for grade: \_\_\_\_\_ Entry year: \_\_\_\_\_



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### STUDENT INFORMATION

Going into grade: \_\_\_\_\_ Date entering school: \_\_\_\_\_  
yyyy/mm/dd Prev. school: \_\_\_\_\_

Legal last name: \_\_\_\_\_ Last name used: \_\_\_\_\_

Legal first name: \_\_\_\_\_ First name used: \_\_\_\_\_

Middle name(s): \_\_\_\_\_ Gender: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_  
yyyy/mm/dd

Religion: \_\_\_\_\_ Parish/church/house of worship \_\_\_\_\_

Sacraments received:

Baptism  Reconciliation  First Communion  Confirmation

Daycare/Babysitter: \_\_\_\_\_  
name contact number

List any allergies, special needs, medical conditions etc.

\_\_\_\_\_  
\_\_\_\_\_

Family doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

Family dentist: \_\_\_\_\_ Phone: \_\_\_\_\_

BC Services Card: \_\_\_\_\_ Indigenous ancestry? YES  NO

Does the school have permission to contact your doctor in case of emergency when unable to contact you? YES  NO

Note: We will call 911 in the event of an emergency.

Emergency contacts: \_\_\_\_\_  
Name (relation to student) contact number

\_\_\_\_\_  
Name (relation to student) contact number



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### FAMILY INFORMATION

Child lives with (please circle one) Parent/Guardian 1 Parent/Guardian 2 Both Shared

Parent/Guardian 1 name: \_\_\_\_\_ email: \_\_\_\_\_

Place of work: \_\_\_\_\_ work #: \_\_\_\_\_

Phone #: \_\_\_\_\_ cell #: \_\_\_\_\_

Mailing address: \_\_\_\_\_  
box # / town / postal code

Street address: \_\_\_\_\_

Parent/Guardian 2 name: \_\_\_\_\_ email: \_\_\_\_\_

Place of work: \_\_\_\_\_ work #: \_\_\_\_\_

Phone #: \_\_\_\_\_ cell #: \_\_\_\_\_

Mailing address: \_\_\_\_\_  
box # / town / postal code

Street address: \_\_\_\_\_

**Is there a custody order/ or other legal orders in effect?** YES  NO

*\*If **YES**, please attach a copy of any legal papers pertinent to your child regarding custody, visitation, or any other matter related to your child's schooling.*

*A copy of an up-to-date court order **MUST** be on file with the school.*

SIBLINGS: YES  NO

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

**I hereby certify that the above statements are true and correct.**

Signature of parent/guardian \_\_\_\_\_  
name date (yyyy/mm/dd)

Signature of parent/guardian \_\_\_\_\_  
name date (yyyy/mm/dd)



# St Joseph's School

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### PREVIOUS EDUCATION

Last school/preschool/daycare attended:

\_\_\_\_\_

name and address

Has your child received learning assistance? YES  NO

Has your child received specialist interventions?  
(speech, hearing, ot, pt, behavioral, etc.) YES  NO

If **YES**, special needs form must be completed and attached to application.

### SCHOOL PROGRAMMING

Please read and sign the consent information below.

I give permission for my child and their teachers to use digital learning platforms to help communicate student learning and learning activities where basic personal information will be stored but not distributed on servers in Canada and abroad.

\_\_\_\_\_

signature

\_\_\_\_\_

date (yyyy/mm/dd)

In registering my child at St Joseph's School I understand that they will take part in the school's complete educational program, which includes the use of information technology. I am supportive of the Catholic curriculum and teachings of the school. I have had explained to me, understand and support the philosophy and policies of the school as outlined in the parent handbook.

\_\_\_\_\_

signature

\_\_\_\_\_

date (yyyy/mm/dd)



## PRIVACY AND INFORMATION PROTECTION

The Personal Information Protection Act is in effect for all independent schools. To ensure that we comply with the legislation, and your wishes as parents/guardians, we ask that you read the following information carefully.

The legislation states that all photographs, names, or anything else that identifies an individual or an individual's personal information, is protected. From time-to-time your child's name and/or photograph may be used in a school newsletter, yearbook or other school publication, or media coverage concerning school events.

### Registration information

Information provided at the time your child was registered at school was collected under the authority of the *Independent School Act*. This data is used for educational program purposes and, when required, may be provided to health services, social services and other support services. If a student moves to another school, student records are requested by that school. It shall be the understanding that our school administration has permission to pass on this information to the student's new school.

### Media coverage

It is possible that there will be media coverage of a school event. This coverage could include your child's photo (or video), name and comments being part of a broadcast, publication or on the school or school authority's website, newsletter or Facebook page.

Please be sure to complete the Personal Information Release Permission portion of the Application and Consent Form. This information will be kept as part of your child's student file as long as they attends St Joseph's School. Please be advised that this is a one-time consent and permission may be revoked at any time by parent request. Kindly note that you are responsible for notifying the school should the status of your permission change.

YES  NO

I permit my child's name and/or photo to be used in any school publication, including school website, social media and newsletters.

YES  NO

I permit my child's name and/or photo to be used in any news media publication.

YES  NO

I permit the school to disclose my name, phone number, mailing address, and my child's name and grade to the Parent Support Group for fundraising and volunteer purposes.



**LEGAL RESIDENCY OF PARENT - FORM A**

*(Ministry of Education Requirement)*

To be completed and signed by a parent or legal (court-appointed) guardian. If legal guardian, attach a copy of court order appointing you as legal guardian.

**Lawfully admitted into Canada**

1. I am (please "x" one):

- A Canadian citizen (if not born in Canada, please attach a photocopy of citizenship paper/card)
  - A Permanent Resident (please attach a copy of parent's landed immigrant status paper or Permanent Resident card)
  - Lawfully admitted to Canada under the Immigration and Refugee Protection Act (Canada) with one of the following documents (please mark the appropriate box below and attach a copy of document):
    - Admission as a refugee or refugee claimant
    - Valid student permit for two or more years (or issued for one year but anticipated to be renewed for one or more additional years)
    - Valid employment authorization (work permit) for two or more years (or issued for one year but anticipated to be renewed for one or more additional years)
    - A person carrying out official duties under the authority of the Visiting Forces Act or as an accredited diplomatic agent, pre-clearance officer, consular officer or official representative in Canada of a foreign government with a consular post in British Columbia
    - Other - document description: (must be cleared with Citizen and Immigration Canada)
- 

**Residency in British Columbia**

2. I am a resident of British Columbia (please "x" one):

- YES Residency address: \_\_\_\_\_
- NO I am not a resident of British Columbia

**Confirming signature:**

3. Parent's/legal guardian's name: \_\_\_\_\_
- Parent's/legal guardian's signature: \_\_\_\_\_
- Parent's/legal guardian's name: \_\_\_\_\_
- Parent's/legal guardian's signature: \_\_\_\_\_

Date: \_\_\_\_\_  
(yyyy/mm/dd)





**FAMILY STATEMENT OF COMMITMENT**

"Motivated by a Christ-centered vision of humanity and human history, our school promotes the formation of the whole person. Such formation embraces not only intellectual, but also physical, emotional, moral and spiritual dimensions of human growth in accordance with the teachings of the Catholic Church. Intellect, emotions, creative ability and cultural heritage have a place in the life of the school. Human knowledge and skills are recognized as precious in themselves, but find their deepest meaning in God's plan for creation." From the PHILOSOPHY OF EDUCATION FOR CATHOLIC SCHOOLS IN THE PROVINCE OF BC by Catholic Bishops of BC. Catholic Schools are committed to fidelity to Jesus Christ, Who said, "Seek first the kingdom of God." The school emphasizes first and foremost the teaching and practice of the Catholic faith. All students, regardless of their religious affiliation, must participate in all the religious instruction and activities of the school community.

CISPG Schools recognize that students may come from family situations that do not conform to the moral teachings of the Catholic Church. Although the personal family background of a student is not an absolute obstacle to enrolment in a CISPG school, when parents choose a lifestyle directly opposed to the Church's deeply held moral teachings, they should recognize that the school is not the right place for their child, since the home and school would be giving contradictory teaching.

Partners (home, school, parish) in Catholic education must work together to provide an environment where faith and learning go hand in hand, leading young people to fullest development. Parents and guardians who enroll their children accept that the school will at all times uphold the teachings of the Roman Catholic Church. While present on the school campus and in school-related activities offsite, every adult must demonstrate conduct that upholds the school's declared mission. A coherent witness to Catholic moral teaching is expected at all times, especially in the public forum.

The following statements confirm parental support of the goals and philosophy of our Catholic school and need to be accepted by all members of the community. Read them carefully. They ask you to make a commitment to the values of our Catholic School community. If you have any questions or concerns regarding this family commitment form, please bring them to the Principal or Pastor who will gladly discuss them with you.

By returning the signed statement with your completed application, you accept the responsibility of this commitment.

1. Parents and guardians agree that they and their families will exhibit conduct consistent with Catholic denominational standards. The determination of whether any conduct contravenes these standards is the right of the CISPG Board of Directors.
2. All students are required to participate in our religious education curricular and co-curricular programs, including liturgical celebrations, prayer, retreats and other spiritual activities.
3. Parents/Guardians are expected to participate in the religious education program as required.
4. Regular school attendance and full participation in all aspects of the academic program of the school are required of every student. Each student is expected to strive toward the development of their full academic potential. Parents are expected to support the academic program as required.
5. Each family is expected to support and participate in the fund-raising activities of the school.
6. Each student is expected to know and follow school policies on behaviour.
7. Parents/Guardians are expected to know and support school policy and procedures.
8. Parents/Guardians are expected to attend program-related events including but not limited to parent/teacher conferences and meet the teacher events.
9. Parents/Guardians agree to accept the responsibility for the cost of tuition, supplies, and other school activities.
10. If any of these conditions are not met, the school reserves the right to refuse admission, or remove a student from the school.

I have read and understand the above expectations and commitments and I hereby accept them as stated.

\_\_\_\_\_  
Family Name (please print neatly)

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_



EDUCATION POLICY MANUAL

Category: PERSONNEL  
Regulation: 460  
Approved Date: February 24, 1997  
Revised Date: D R A F T  
Page: 1 of 1

## **VOLUNTEERS**

### **Regulations and Procedures**

1. Volunteers can make significant contributions to the local community in many ways such as the following:
  - classroom material preparation;
  - instructional assistance as a resource person to provide expertise;
  - supervising students in the presence of a certified teacher;
  - sharing talents and skills within the instructional program planned by the teacher;
  - marking student work by using a teacher-prepared answer key.
2. All volunteers in the school must be approved by the principal.
3. Those who work directly with students or who have, or potential have, unsupervised access to students, must successfully complete a criminal record check process at least every 5 years, or at the request of the principal. (Unsupervised access should only occur in a public place or where there is no reasonable expectation of privacy.) Criminal record checks required by this policy will be a local school expense. Proof of current membership in professional organizations which require a criminal record check is also acceptable, for example BC Teacher Certification, RCMP, etc.
4. Schools using volunteers shall ensure appropriate orientation and ongoing supervision.
5. Volunteers will be supervised by school employees.
6. Volunteers must:
  - adhere to school and CISPG policies and regulations
  - speak and act with respect
  - deal judiciously with students
  - respect complete confidentiality with regard to any student matters that they may come in contact with
  - report all incidents of student or personal injury to staff
  - maintain confidentiality with regard to personnel matters
7. Volunteers must complete a Volunteer Application Form and agree to comply with the Volunteer Code of Conduct and the Volunteer Confidentiality Agreement.
8. If the information provided on the volunteer application form changed, the volunteer must notify the school of the change.
9. A volunteer file will be maintained in a private location at the school office and updated on a regular basis (minimum once per school year).  
The file should contain:
  - criminal record checks
  - volunteer application forms
  - signed code of conduct/confidentiality agreements
  - (optional items) other pertinent information (driver's information, medical information, relevant certification and training)



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### EDUCATION POLICY MANUAL

Category: PERSONNEL  
Regulation: 460  
Approved Date: February 24, 1997  
Revised Date: DRAFT  
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## VOLUNTEERS

### Policy 460

Volunteers form an integral part of our school communities. They provide important services including, but not limited to, curricular and extra-curricular program support, governance, facility operations, supervision, fundraising, maintenance, and special events. Whenever volunteers work directly with students, policies and procedures must be in place to best facilitate the enhancement of the programs and to ensure the safety and well-being of the students.

### Reason for Policy

The CISPG Board of Directors supports the use of volunteers in schools.

Volunteers can enhance the curricular and extra-curricular programs and offerings of the school in a variety of ways, such as:

- providing adult supervision in situations such as field trips
- providing assistance to the teacher in the classroom by helping prepare instructional materials
- providing assistance to the teacher by marking objective assignments (e.g. mathematics)
- assisting in the instruction of children by reading to children or listening to them read
- sharing a particular gift or talent with children (e.g. playing an instrument)

Reference: Regulation 460  
Volunteer Application Form  
Volunteer Code of Conduct



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### VOLUNTEER APPLICATION FORM

Date: \_\_\_\_\_  
yyyy/mm/dd

#### Volunteer

Name: \_\_\_\_\_  
surname given names

Address: \_\_\_\_\_  
Street / box # / city / postal code

Telephone #s: \_\_\_\_\_  
home / cell / work

Emergency contact: \_\_\_\_\_  
name best #(s) to reach them at

BC Services Card: \_\_\_\_\_

Volunteer situations preferred (check as many as apply):

- |   |  |
|---|--|
| <input type="checkbox"/> Classroom – grades _____ | <input type="checkbox"/> lunch program |
| <input type="checkbox"/> library                  | <input type="checkbox"/> fundraising   |
| <input type="checkbox"/> technology               | <input type="checkbox"/> social events |
| <input type="checkbox"/> recycling program        | <input type="checkbox"/> phone parents |
| <input type="checkbox"/> office                   | <input type="checkbox"/> other _____   |

Times available: \_\_\_\_\_

#### References:

1. \_\_\_\_\_  
name phone # relationship
2. \_\_\_\_\_  
name phone # relationship

#### Police record check

- I am willing to submit to a criminal record check at no financial cost to myself.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
signature of volunteer yyyy/mm/dd

Approval: \_\_\_\_\_ Date: \_\_\_\_\_  
signature of principal yyyy/mm/dd



## CRIMINAL RECORD CHECK AND DRIVERS ABSTRACT PROCESS FOR VOLUNTEERS

Please be advised in order to be a parent volunteer / chaperone, the school **must** have the following three pieces of information from you.

- 1 Current Criminal Record Check (valid for 5 years)

*May be obtained through: Criminal Records Review Program (CRRP)  
applicant-based online services may be obtained through\*:*

**Online link: <https://justice.gov.bc.ca/criminalrecordcheck>  
Access Code: KWX8WTSZE4**

*Enter the link and the access code. It asks you would like to go through the BC Services Card. If you choose to use the BC Services card you have to download the app on your phone, if you don't already have it. Apparently this is a less complicated form to fill out. There is an option if you choose not to download the BC Services app, click on the "I do not have a BC Services card" and it will send you to a more complicated form. Once you have completed the process, the Criminal Record Report is emailed to the office. There is no charge for this service.*

*\*If you do not have a BC Care Card, you will require a paper form, which is available in the office.*

- 2 Current Driver's Abstract (must be renewed every September)(needs to show the **last 6** years)

*May be obtained through: The Access Centre, Smithers  
Phone # 1 800 663 3051  
Online [www.icbc.com](http://www.icbc.com)  
Emailed to [stj@cispg.ca](mailto:stj@cispg.ca)*

- 3 Copy of current valid vehicle insurance for the vehicle you will be driving to ensure third party liability insurance is in place. \*

We appreciate your support for these field trips and thank you for your time in fulfilling these requirements.



**St Joseph's School**  
**2023-2024 Application for Admissions**

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### OVERDUE ACCOUNTS COLLECTION POLICY

Catholic Independent Schools of Prince George (CISPG) policies 218 and 501 set the framework for local school fee policies and overdue accounts collection procedures.

#### Preamble

Parents/Guardians of children attending St. Joseph's School agree to the responsibility of paying school fees as prescribed and collected by School Council. Parents/Guardians of children attending St. Joseph's School further accept the responsibility to ensure their payments are not overdue. The *St. Joseph's School Overdue Accounts Collection Procedure* applies to the following St. Joseph's school fees:

- school tuition
- school supplies
- school activities fees
- bus fees
- other fees

School fees are an essential component to the operating budget of St. Joseph's School. Satisfying the commitment to pay school fees is a matter of justice. Overdue accounts, or accounts in arrears, will be investigated by the St. Joseph's School Council headed by the Admissions Committee. The admissions Committee will be comprised of one School Council member acting as chairperson, Pastor, school principal, school bookkeeper, school secretary, and other members as required.

St. Joseph's School reserves the right to refuse admission or remove a student/students from St. Joseph's school if consistent delinquency of accounts in arrears continues.

#### Procedure

1. A Registration and Tuition Commitment Form will be signed each school year. It will contain:
  - a. expectations of St. Joseph's School in regard to tuition payments
  - b. total tuition commitment depending on number of students and tuition rates
  - c. method of accepted payment and time period of payments
  - d. opportunity to request financial assistance if there is financial hardship
  - e. Signature to indicate family understands obligations
2. Tuition is required by the beginning of the pay period (yearly, quarterly, monthly options). Payment not received by this time will make the account in arrears.
3. All other school fees are due at time of invoicing. Payment not received within 30 calendar days will make the account in arrears.
4. At any time a family experiences financial hardship, they can request assistance. The following steps will be followed:
  - a. Tuition Assistance Form is filled out by applicant
  - b. The form is presented to School Council by the Admissions Committee for discussion
  - c. The School Council will decide, in conjunction with the Parish, to accept/deny/provide partial assistance with a consensus or simple majority vote
  - d. The School Council decision will be communicated to the applicant in a timely manner



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5. Accounts in arrears will be investigated. The following Procedure will be followed:
- a. Tuition accounts will be deemed in arrears when payment is more than two weeks late
  - b. Invoiced school fees will be deemed in arrears 30 calendar days after invoicing
  - c. A first letter will be mailed home via regular mail or email with a copy being retained and placed in the file stating:
    - i. Account is in arrears
    - ii. The family will contact the school with payment
    - iii. If financial assistance is required, the family will fill out the Tuitions Assistance Form, which is included with the overdue notice and be provided the School Council for approval or denial
    - iv. Someone from the School Council or the Admissions Committee will follow up with a phone call if necessary
  - d. School Council and the Admissions Committee will follow up with a second letter via Registered Mail if the school fees have not been paid and no contact with St. Joseph's School has been made within 10 days of the first letter with a copy being retained and placed in the file stating:
    - i. The account is still in arrears and no payments have been received
    - ii. No communications have been received by St. Joseph's School or Council
    - iii. School Council and the Admissions Committee will be following up with the family
    - iv. Consequences of consistent delinquency as stated in 5(e) of these procedures
  - e. Consistent delinquency of tuition can invoke the following actions on the part of St. Joseph's School:
    - i. Re-enrollment of the student(s) is denied/delayed/not guaranteed
    - ii. Termination of enrollment
    - iii. Account sent to a Collections Agency
    - iv. Requirement for advance pre-payment of tuition in full at the beginning of the school year
  - f. School Council will discuss in-camera the actions that will be taken in cases of consistent delinquency. The payment history, or lack thereof, will be considered. The School Council decision will be communicated to the relevant parties in a timely manner.

I have read and understand the Overdue Accounts Collection Procedure.

\_\_\_\_\_

(print) parent/guardian name

\_\_\_\_\_

date (yyyy/mm/dd)

\_\_\_\_\_

parent/guardian signature





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TUITION COMMITMENT FORM

Family Name: \_\_\_\_\_ Date: \_\_\_\_\_

yyyy/mm/dd

Student's first name(s): 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_

Parent/Guardian #1 (please print):
First name: \_\_\_\_\_
Legal surname: \_\_\_\_\_
PO Box: \_\_\_\_\_
Street address: \_\_\_\_\_
Postal code: \_\_\_\_\_
Telephone (home): \_\_\_\_\_
(work): \_\_\_\_\_
(cell): \_\_\_\_\_
Email: \_\_\_\_\_

Parent/Guardian #2 (please print):
First name: \_\_\_\_\_
Legal surname: \_\_\_\_\_
PO Box: \_\_\_\_\_
Street address: \_\_\_\_\_
Postal code: \_\_\_\_\_
Telephone (home): \_\_\_\_\_
(work): \_\_\_\_\_
(cell): \_\_\_\_\_
Email: \_\_\_\_\_

Financial fees for the school year 2023-2024 are as follows:

- Tuition rates per month: \$305 single child
(subject to change) \$415 two children
\$ 20 for each additional child
\*Bussing fee (annual) \$500 per family (annual rate)
(subject to change/one-time fee)
\*\*Homework book/supply fee \$ 12 per year (grades 3-7) per student
(subject to change/one time fee)

Annual Family Fees Due
Tuition: \_\_\_\_\_
Bussing\*: \_\_\_\_\_
Agenda fee\*\*: \_\_\_\_\_
Total: \_\_\_\_\_

A. Financial commitment:

- [ ] I will pay the full fees in the current year.
[ ] I am requesting financial assistance (please fill out section on reverse)

Name of person #1 making the payments: \_\_\_\_\_ % of total

Name of person #2 making the payments: \_\_\_\_\_ % of total

Frequency of Payments: [ ] Monthly [ ] Quarterly [ ] Annually

Method of Payment: [ ] Pre-authorized debit [ ] Post-dated cheques [ ] Cash

All forms of tuition payment must be paid by the 15th of the month.

[ ] I have read and understand the Overdue Accounts Collection Procedure.

B. Sign here

Parent/Guardian #1: \_\_\_\_\_ Date: \_\_\_\_\_
yyyy/mm/dd

Parent/Guardian #2: \_\_\_\_\_ Date: \_\_\_\_\_
yyyy/mm/dd



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**C. Financial assistance request:**

Please fill this section out if you are requesting financial assistance. Someone from the School will contact you to arrange a meeting to process the request.

Reason(s) for request:

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Have you previously searched for other funding opportunities through community partners or organizations to assist with your financial obligations, prior to requesting tuition assistance?

YES  NO

If requesting financial assistance, please give the following information:

Amount you are able to pay per month: \$\_\_\_\_\_

Net Income of both parents from previous year's tax return submissions: \$\_\_\_\_\_

Copies must be provided by both parents.

Date on which we can review tuition payments: \_\_\_\_\_  
 yyyy/mm/dd

**Office use only:**

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Date of approval: \_\_\_\_\_  
 yyyy/mm/dd

School representative: \_\_\_\_\_  
 name signature

(Principal, pastor, or school council member)



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**Pre-Authorized Debit (PAD) Agreement**

ST. JOSEPH'S SCHOOL

Date: \_\_\_\_\_

Please debit my bank account: (attach VOID cheque) the sum of:

Tuition \$ \_\_\_\_\_ PK/ASP Fees \$ \_\_\_\_\_ Bus Fees \$ \_\_\_\_\_

Child's Name \_\_\_\_\_

The debit will be processed to your account on either the (please choose one date):

1<sup>st</sup> day of the months October through June **OR** the 15<sup>th</sup> day of the months October through June.

***This Agreement is for a personal Pre-Authorized Debit.***

Signature of account holder(s): \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Please print name: \_\_\_\_\_

I may revoke my authorization at any time, subject to providing notice of 15 days. To obtain a sample cancellation form, or for more information on my right to cancel a PAD agreement, I may contact my financial institution or visit [www.cdnpay.ca](http://www.cdnpay.ca).

St. Joseph's School  
Box 454, 4054 Broadway  
AveSmithers, BC V0J 2N0  
Email: [stj@cispg.ca](mailto:stj@cispg.ca)

I have certain recourse rights if any debit does not comply with this agreement. For example, I have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD Agreement. To obtain more information on my recourse right, I may contact my financial institution or visit [www.cdnpay.ca](http://www.cdnpay.ca).

Please attach a voided cheque.



**St Joseph's School**  
**2023-2024 Application for Admissions**

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**St Joseph's School**  
**2023-2024 Application for Admissions**

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**CONSENT FOR RELEASE OF INFORMATION**

To be filled out only by those transferring into St. Joseph's.

Student: \_\_\_\_\_ Birthdate: \_\_\_\_\_  
yyyy/mm/dd

I hereby authorize \_\_\_\_\_ (previous school) to release all documents, including my child's student file and their confidential file (special education file) containing assessments or Individual Education Plans, which would assist St Joseph's School in developing an appropriate educational program. All information provided will be considered confidential and treated accordingly.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
yyyy/mm/dd