

HOWLETT ACADEMY ADMISSION APPLICATION

PHOTOGRAPH
OF
APPLICANT

ADMISSION CHECKLIST

- Completed application and health forms
- Recent photograph of applicant
- Proof of Canadian residency status
- Copies of report from most recent school
- Copy of immunization record

***Books, class materials,
day trips and other
supplies are included in
the tuition fees.***

Personal Information

Student's Last Name

Student's First Name

Mailing Address

City

Province

Postal Code

Birth Date

Gender

Information from Parent

Parent #1 First Name

Last Name

Mailing Address (if different from above) Street

City

Postal Code

Telephone (Cell)

(Work)

Email

Occupation

Parent #2 First Name

Last Name

Mailing Address (if different from above) Street

City

Postal Code

Telephone (Cell)

(Work)

Email

Occupation

ACADEMIC INFORMATION

Current Grade

Current School

Complete Postal Address of Current School

Email of Current School

FAVOURITE SUBJECTS

- Math Social Studies Science French English
 Phys. Ed Art Music Other: _____

EXTRACURRICULAR ACTIVITIES/ INTERESTS

FOR INTERNAL USE ONLY:

Date Received:

Contact Date:

Interview Date:

Application Status:

Complete

Missing: _____

Comments:

Howlett Academy

Child Health Form

Please complete and return to school

Child's Name: _____

DOB m/d/y _____

OHIP #: _____ Version Code: _____

Child's Physician: _____

Physician's Phone: (____) _____

Health Information:

Has your child had a recent surgery or illness? YES NO

If yes, explain: _____

Has your child recently broken any bones? YES NO

If yes explain: _____

Has your child been required to take any medications? YES NO

If yes explain: _____

Is your child allergic to anything or lactose intolerant? YES NO

If yes explain: _____

General Information: Please use this space to provide any additional information about your child's behaviour and the physical, emotional or mental health about which the school should be aware:

Please update your child's Immunization Record and provide a copy to the school.

Date of last tetanus shot: _____