



## Pattison High School

981 Nelson Street, Vancouver, BC, CANADA V6Z 3B6 (Downtown)  
Tel: 604-608-8788 | Fax: 604-608-8789  
E-Mail: info@pattisonhighschool.ca | Website: www.pattisonhighschool.ca

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# APPLICATION FOR ADMISSION

## STUDENT INFORMATION

Mr.  Ms. \_\_\_\_\_, \_\_\_\_\_ ( \_\_\_\_\_ )  
Family Name Given Name English Name (if any)

Name in native language \_\_\_\_\_ Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Year Month Day

Nationality \_\_\_\_\_ Native Language \_\_\_\_\_

Current Status in Canada:  Citizen  Permanent Resident  Student Visa  Visitor  None Home

Phone \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

Social Media ID \_\_\_\_\_  Facebook  Skype  WeChat  Kakao  Line  Other

Address (in home country) \_\_\_\_\_

City / Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Address (in Canada) \_\_\_\_\_

City / Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_ Canada \_\_\_\_\_

## PARENT INFORMATION

**Father** \_\_\_\_\_ Occupation \_\_\_\_\_ Position \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Social Media ID \_\_\_\_\_  Facebook  Skype  WeChat  Kakao  Line  Other

**Mother** \_\_\_\_\_ Occupation \_\_\_\_\_ Position \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Social Media ID \_\_\_\_\_  Facebook  Skype  WeChat  Kakao  Line  Other

## EMERGENCY CONTACT IN CANADA

Guardian \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

**EDUCATION HISTORY**

Name of Previous School \_\_\_\_\_

City \_\_\_\_\_ Country \_\_\_\_\_ From: \_\_\_\_\_ / \_\_\_\_\_ To: \_\_\_\_\_ / \_\_\_\_\_  
Month Year Month Year

My current English level is approximately:

Beginner  Intermediate  Advanced  Excellent  EPT \_\_\_\_\_%

**ENROLLMENT INFORMATION**

The grade I plan to enroll in is:

Grade 8  Grade 9  Grade 10  Grade 11  Grade 12  Adult Program

Program Starting Date: \_\_\_\_\_ / \_\_\_\_\_ Program Finishing Date: \_\_\_\_\_ / \_\_\_\_\_  
Month Year Month Year

**MEDICAL INSURANCE**

Students are required to have medical insurance. The school can provide the opportunity for medical insurance through a group policy if so desired. Otherwise, it is the responsibility of the student to provide proof of adequate medical coverage. The parent/guardian or student (if over the age of 19), agree to assume responsibility for any injury resulting from participation in school activities. All school activities are sufficiently supervised to ensure the safety of all participants. The school is not responsible for any loss or injury by the student during travel to and from Pattison High School.

I have my own medical insurance (please submit copy)  I require the school to arrange medical insurance

**MEDICAL ALERT / LEGAL ALERT**

Do you have any medical or legal condition that we need to be aware of?

No  Yes Please specify \_\_\_\_\_

Doctor Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Address: \_\_\_\_\_

**OTHER STUDENT SERVICES YOU WOULD LIKE PATTISON HIGH SCHOOL TO PROVIDE:**

Accommodation / Homestay  Airport pick-up  Custodianship

If homestay service is required, please complete Homestay Application Form.

**HOW DID YOU FIND OUT ABOUT OUR SCHOOL?**

Friend \_\_\_\_\_  Media \_\_\_\_\_  Agent \_\_\_\_\_  
Name of friend Name of media Name of agent

## PATTISON HIGH SCHOOL CODE OF CONDUCT

PATTISON HIGH SCHOOL maintains a CODE OF CONDUCT that assists all of us to enjoy and benefit from respectful behaviours within the international school community, and respectful behaviours toward the community property.

The CODE OF CONDUCT includes the following requirements:

1. The wearing of the school uniform from the time that the student enters the school until the student leaves the school
2. On time arrival to classes, as a form of respect to other students and the teacher as well as the activity that is taking place in the classroom
3. Students always present work that is their own, original work – and not the result of cheating or plagiarism
4. The use of the English language at all times when in the school - in the classrooms, hallways and public areas
5. Smoking of any kind – whether tobacco or e-cigarette is specifically prohibited on the private property occupied by the Electra, from the buildings to the sidewalk

Smoking on the Electra property, which includes the school, is strictly prohibited. Bringing the smell – as a result of smoking – into the school and the classrooms is also prohibited.

*Parent / Guardian Initial:* \_\_\_\_\_ *Student Initial:* \_\_\_\_\_

## PATTISON HIGH SCHOOL REFUND POLICY

1. Any request for course or program withdrawal involving tuition refund must be made by Tuition Refund Request Form of the school. The School reserves the right to inform the Canada Immigration of an international student's withdrawal or expulsion from school.
2. The amount of tuition refund is determined by the following regulations:
  - A. **Full Prepaid Tuition Fee**, minus a processing fee of \$500 CDN will be refunded to an international student whose visa application is rejected by the Canadian Immigration Office. (The original letter of rejection for the latest Letter of Acceptance is mandatory with the completed Tuition Refund Request Form.)
  - B. **1/2 of Prepaid Tuition Fee** will be refunded if a student withdraws prior to the start of the **FIRST SEMESTER ONLY**.
  - C. **1/3 of Prepaid Tuition** will be refunded if a student withdraws within 15 calendar days from the start of the **FIRST SEMESTER ONLY**.
  - D. **No Refund** will be granted to a:
    - Student who withdraws after 15 calendar days from the start of the first semester at PHS.
    - Student who is expelled from PHS due to a violation of school policy.
    - Student who obtains a new or extended visa or study permit with our school letters.
    - Student who provides false information.
3. The school will determine individual specialized cases and will deal with accordingly.

\* Please be advised that the tuition refund process will take 6-8 weeks upon the submission of the completed and signed Tuition Refund Request Form by the student.

*Parent / Guardian Initial:* \_\_\_\_\_ *Student Initial:* \_\_\_\_\_

**I hereby certify that the information above is correct and complete. If I am accepted as a student at Pattison High School, I hereby agree to abide by all rules and regulations of the school.**

**I consent to having the personal information collected on this form. This information is required in order to register your child and assist the school in making an informed decision on your child's education program. It will also allow the school to respond immediately to an emergency. I have been informed that I may receive a copy of the Personal Information Protection Act [PIPA] policy that informs Pattison High School's student records requirements.**

**I give permission to have my child's photograph used to advertise and highlight students at PHS.**

**Check this box to confirm your consent to receive our newsletters containing news and information about courses, programs and other opportunities offered by Pattison High School. You can unsubscribe at any time.**

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

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_