



Mediated Learning Academy

Application for Admission

Please attach a copy of Birth Certificate, Recent Report Card and Assessment with the application. Application does not guarantee admission.

I/WE hereby make application to Mediated Learning Academy for the admission of:

Legal Surname: _____ **Male:** _____ **Female:** _____

Legal Given & Middle Name: _____ **Usual Given Name:** _____

Desired Date of Entry: _____ **Application to Grade:** _____

Date of Birth: _____ **Place of Birth:** _____
(Day/Month/Year) (City and Country)

Diagnosis: _____ **If no diagnosis, is Assessment pending? Yes** _____ **No** _____

Citizenship: _____ **Language Spoken at Home:** _____

Study Permit Expiry: _____

Parents are:

Canadian Citizen _____ Landed Immigrant _____ Visitor/Work Permit _____

Signature of Parent: _____

Print Name: _____ Date: _____

Name of Mother: _____

Address: _____ City and Postal Code: _____

E-Mail address: _____

Home #: _____ Cell #: _____ Work #: _____

Name of Father: _____

Address: _____ City and Postal Code: _____

E-Mail address: _____

Home #: _____ Cell #: _____ Work #: _____

Student Resides with: Mother: _____ Father: _____ Both: _____ Other: _____

If parents are divorced or separated, please indicate who to contact according to the custody agreement.

Present or most recent school: _____

Address: _____

Telephone #: _____ Fax #: _____

A non-refundable application fee of \$500.00 must accompany this application for admission. The application fee is not applied towards tuition.

I/We jointly and severally:

- a.) agree to be responsible for the fees and expenses as outlined in the fee structure.
- b.) agree to refund policies in the event of withdrawal or expulsion of our son/daughter.
- c.) agree to provide the required health and medical information of the applicant.
- d.) agree to provide the applicant with the prescribed school dress code/uniform.
- e.) agree to provide proof of B.C. residency of parent/guardian.
- f.) agree to support the rules and policies of Mediated Learning Academy.

Signature(s): _____

Father

Dated _____

Mother

Dated

Legal Guardian (s)

Dated

I, _____ (**Legal Guardian of applicant**), am a resident of British Columbia and reside at the following address:

Address: _____

City: _____ Postal Code: _____

Home # _____ Business #: _____ Cell #: _____

Mediated Learning Academy is governed by the Board of Directors of MLE Training and Research Society. Parents and Guardians of students in the School become members of the Society upon enrolment of their child/children.