

St. James School

2700 – 28th Avenue Vernon, BC V1T 1V7 Telephone: (250) 542-4081 Fax: (250) 542-5696 Principal Email: <u>principalsjs@shaw.ca</u>



Learning with Spirit

Welcome to St. James!

www.stjamesvernon.com

What will you find at St. James?

- ✤ Caring and inclusive atmosphere with staff who love kids and kids who love learning
- Ministry of Education certified teachers and qualified Certified Educational Assistants
- Enriching Religious and Spiritual formation, including the use of Love and Logic
- ✤ A Safe, Helpful, Accountable, Respectful and Positive (SHARP) approach to everything we do
- Staff trained to support ERASE Bullying
- ✤ Adherence to the BC Ministry of Education's K 7 Curriculum requirements
- Full day, five day a week Kindergarten (half-day option)
- Technology-rich programming: regular use of the computer lab and SMART boards in every classroom
- Weekly school library access and instruction
- ✤ French instruction and integration in the classrooms from K 7
- Music instruction and integration, including voice and early instrumentation
- Active and welcoming parent community. An openness and encouragement of family participation through the Saints of Service (SOS) program and through a variety of Parent Support Group (PSG) family events
- Extended supervision (AM: 7:45; after school until 4:30PM)

Please phone the school at 250-542-4081 to arrange a school tour or to have someone assist you with your registration.

Sincerely,

Paul Rossetti

Principal

St. James Catholic School

SALIAT JANES SCHOOL

Application & Registration Form (Form A)

2700 – 28th Avenue Vernon, BC VIT 1V7 Telephone: (250) 542-4081 Fax: (250) 542-5696

Office Use Only	
Date Rec'd	
Reg Fee	

Date Accepted

Notified

Please ensure that all information is completed in order for this application to be processed.

Student Information				
LEGAL LAST NAME		STUDENT ID NUMBER	CARE CARD NUMBER	
LEGAL GIVEN NAMES		SEX	BIRTH DATE	
COMMON NAMES				
RELIGION				
BAPTISM DATE	BAPTISM PLACE	1 ST RECONCILIATION DATE	1 ST RECONCILIATION PLACE	
1 ST COMMUNION DATE	1 ST COMMUNION PLACE	CONFIRMATION DATE	CONFIRMATION PLACE	
Family Information				
CHILD RESIDES WITH		HOME PHONE NUMBER	CELL PHONE NUMBER	
MAILING ADDRESS		STREET ADDRESS (if different from mailing)		
CITY/ PROVINCE	POSTAL CODE	EMAIL ADDRESS		
FATHER'S NAME		FATHER'S RELIGION		
FATHER'S WORK	PHONE	PARISH	REGISTRATION/ENVELOPE#	
MOTHER'S NAME		MOTHER'S RELIGION	MOTHER'S MAIDEN NAME	
MOTHER'S WORK	PHONE	PARISH	REGISTRATION/ENVELOPE#	
Emergency Information				
EMERGENCY CONTACT	RELATIONSHIP	PHONE NUMBER	CELL PHONE NUMBER	
FAMILY DOCTOR		PHONE NUMBER		
FAMILY DENTIST		PHONE NUMBER		
ALLERGIES				
HEALTH PROBLEMS				
LEGAL RESTRICTIONS (Please provide documentation, if applicable)				
Citizenship Information				
BIRTH PROVINCE		BIRTH COUNTRY	LANGUAGE AT HOME	
NATIVE ANCESTRY	BAND NAME	STATUS LIVING ON RESERVE	DIA NUMBER	

Sibling	Information

NAME	BIRTH DATE	NAME	BIRTH DATE
NAME	BIRTH DATE	NAME	BIRTH DATE

I certify that this information is complete and correct.



St. James Catholic School

New Student Application (Form B) 2700 – 28th Avenue Vernon, BC VIT IV7 Telephone: (250) 542-4081 Fax: (250) 542-5696

ite:
udent Name:
vrent(s) Name(s):
arent(s) Name(s):

Please ensure that all information is completed in order for this application to be processed.

Required Documentation For Student

COPY OF YOUR CHILD'S LAST REPORT CARD (at time of	COPY OF STUDENT BIRTH CERTIFICATE	COPY OF S.I.N. CARD OF ONE PARENT
application):		
COPY OF STUDENT BAPTISMAL CERTIFICATE (Catholic	FAMILY STATEMENT OF COMMITMENT (B1)	SIGNED & COMPLETED LEGAL RESIDENCY OF PARENT
Students)		FORM (B2)

Academic History: Former Schools Attended (& contact information if available)

Grades	Year	Name of School	Address	School Phone #

Student Profile (level of detail provided at your discretion)

Please comment on academic and/or disciplinary strengths and weaknesses that your child has as a student (i.e.: talents such as writing, math, artistry, athletics, leadership; difficulties such as reading, attention, discipline, special needs, chronic health).

Family Statement of Commitment (B1)

Child(ren)'s Name(s):

(please print)

Philosophy

"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. 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 PHILOSOPHY OF EDUCATION FOR CATHOLIC SCHOOLS IN THE PROVINCE OF BC by Catholic Bishops of BC.

Partners (home, school, parish) in Catholic Education must work together to provide an environment where faith and learning go hand in hand leading the young people to be the best they can be.

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

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

- Parents and guardians agree that they and their children will respect Catholic Denominational • standards as contained in the Catechism of the Catholic Church.
- All students are required to participate in our religious education curricular and co-curricular • programs including liturgical celebrations, retreats, prayer, etc.
- Parents/Guardians are expected to support the Religious Education Program and participate in it as • required.
- 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 his/her full academic potential.
- Each family is expected to support and participate in the fund-raising activities of the parish/school. • This means each family shares in the responsibility of educating our children.
- Each student is expected to know and follow school policies on behaviour.
- Parents/Guardians are expected to know and support school policy and procedures. •
- Parents/Guardians must attend an interview with the Principal and Pastor prior to the student being accepted into St. James School.
- Parents/Guardians agree to accept the responsibility for the cost of tuition, supplies and school • incidentals.

If any of these conditions are not met the school reserves the right to refuse admission, or remove the student from the school.

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

Parent's Name (please print)

Parent's Signature: Date:

Legal Residency of Parent (B2)

(Required by the Ministry of Education for purposes of funding)

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

- 1. I am (please 🗵 one):
 - □ A Canadian citizen (please attach a copy of parent's birth certificate or 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 Act (Canada) with one of the following documents (please mark the appropriate □ box below and attach a photocopy of document):
 - □ Admission as 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 office, 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 Citizenship and Immigration Canada

2. I am a resident of British Columbia (please 🗵 one):		
□ Yes Residency Address:		
No, I am not a resident of British Columbia		
Confirming Signatures:		
3. Parent's/Legal Guardian's Name (please print):		
Parent's/Legal Guardian's Signature:		
Date:		
For Office Use Only		
Proof of Residency: Date:		