



Christ Church Cathedral School

Junior Kindergarten - Grade 8

912 Vancouver Street
Victoria, BC, V8V 3V7
Telephone: 250.383.5125
admissions@cathedralschool.ca

APPLICATION PROCESS

Please follow the steps below to complete your child's application and return all forms as individual PDF files to: admissions@cathedralschool.ca

Application Deadline: Kindergarten is the recommended entry year for Cathedral School and to ensure your child is considered for a space, we recommend you complete their application in the fall.

We offer rolling admissions for spaces in grades 1-8.

- 1. Application Form:** We ask that this form be filled out and submitted by one of the child's parents or legal guardians.
- 2. Supporting Documents:** To support the application, please submit a copy of the applicant's:
 - a. Birth Certificate (and Canadian Citizenship Document if applicable)
 - b. Photo
 - c. Report Card
 - d. Academic Recommendation Form
 - e. Psychoeducational Assessment and/or IEP (where applicable)
- 3. Application Fee Payment:** A non refundable \$150.00 application fee can be paid by cash, cheque payable to Christ Church Cathedral Educational Society, or e-transfer to accounts@cathedralschool.ca.
- 4. School Visit:** Following steps 1-3 above, your family will be invited to visit our school. During your visit, we will make the arrangements for your family to:
 - a. Meet with the Head of School
 - b. Tour the school to see our facilities and learn about our full programming
 - c. Visit your child's future class
 - d. Have your child engage in an individual assessment
- 5. Application Review:** Our Admissions Committee will review your child's file and respond with one of the following Admissions Decisions
 - a. *Offer of Acceptance* - your child has successfully earned a space at Cathedral School. Successful applicants will be asked to pay a tuition deposit to secure their space.
 - b. *Wait Pool* - your child's application will remain active in our database as a potential candidate for the next school year. This offer may be space dependent.
 - c. *Decline of Acceptance* - for reasons that the Head of School will discuss with your family, it is our recommendation that Cathedral School is not the best fit for your child.

Applicant Information

Entry Grade: _____ Entry Year: _____

*Legal First Name: _____

(Legal name as it appears on applicants birth certificate)

Preferred Name (optional): _____

Legal Middle Name: _____

*Legal Last Name: _____

(Legal name as it appears on applicants birth certificate)

*Date of Birth: Year _____ Month _____ Day _____ Gender: _____

*Citizenship (required): Canadian Citizen Permanent Resident International

*Place of Birth: _____

Educational History

Previous School 1: _____

Location: _____

Start Date - Year: _____ Month: _____ Day: _____

End Date - Year: _____ Month: _____ Day: _____

Previous School 2: _____

Location: _____

Start Date - Year: _____ Month: _____ Day: _____

End Date - Year: _____ Month: _____ Day: _____

Please attach the most recent progress report issued by the school or preschool your child last attended.

Applicant Questionnaire

In this section, the applicant should provide the answers. Parents may assist by transcribing verbal responses.

What are your top three interests?

Interest 1: _____

Interest 2: _____

Interest 3: _____

Have you participated in any co-curricular clubs or activities?

If yes, please list them and explain your involvement: _____

Supporting Your Child at CCCS

*Has your child ever received Learning Support? Yes No

If yes, please explain the nature and duration of the support: _____

*Is your child currently following an Individual Education Program (IEP)? Yes No

*Has your child experienced behavioral challenges that required intervention? Yes No

*Has your child had an educational or behavioral assessment by a psychologist, medical doctor, or pediatrician? Yes No

*Has your child received speech-language therapy? Yes No

If yes, please explain the nature and duration of the support: _____

Is there any additional information about your child's health that you believe the School should be aware of? _____

If you answered "yes" to any of the above questions please attach the relevant documentation to this application.

Parent / Guardian Information

Parent/Guardian 1

*First Name: _____ *Legal Last Name: _____

*Email: _____ *Primary Phone: _____

Anglican Church Parish (if applicable): _____ Envelope number: _____

Primary Residence

*Street Address: _____ *City: _____

*Country/Region: _____ *Postal Code: _____

*Does the applicant reside with you at this address? Yes No

If yes, how frequently? _____

*Do you have legal guardianship? Yes No

Parent/Guardian 2

First Name: _____ Legal Last Name: _____

Email: _____ Primary Phone: _____

Anglican Church Parish (if applicable): _____ Envelope number: _____

Primary Residence:

(if different from above)

Street Address: _____ City: _____

Country/Region: _____ Postal Code: _____

Does the applicant reside with you at this address? Yes No

If yes, how frequently? _____

Alumni Connections

Are you a current or past CCCS family?* Yes No

If yes, please list the family members who have attended: _____

If you have no previous connections to our school, how did you hear about us?

Word of Mouth Social Media Online Ads Island Parent Magazine YAM / Douglas Magazine

Signature

Parent/Guardian 1

Signature:* _____ Date (YY/MM/DD):* _____

Parent/Guardian 2

Signature: _____ Date (YY/MM/DD): _____

Thank you for your interest in Cathedral School