2024-2025 APPLICATION FORM

Include with this form:

- \$100 *application fee (per family)*
- \circ Copy of student's birth certificate
- \circ Copy of most recent report card
- Statement of Faith, signed
- Code of Conduct, signed



STUDENT INFORMATION:

745 Kapelus Drive, West St. Paul, MB, R4A 5A4 admissions@thekingsschool.ca p: 204.989.6581 f: 204.989.6584 www.thekingsschool.ca

Legal Last Name		First Name and Middle Name			Grade Enrolling In		
Preferred First Name (if different)		Sex 🗌 N	Sex Male Female Birth Date			mm/dd/yyyy)	
Citizenship 🗌 Canadian 🗌 Other		If in Canada as a temporary resident, on a work/study permit, or as a refugee, please include documentation:					
Specify		Temporary Resident Work/Study Permit Refugee Permanent Resident Date Entered into Canada (mm/dd/yyyy)					
Religious Affiliation		Place of Worship					
PARENT/CAREGIVER INFORMATION:							
Last Name			First Name				
Primary Phone	Work Phone		Email Address				
Street Address			City & Province		Postal Code		
Last Name			First Name				
Primary Phone	Work Phone		Email Address				
Street Address			City & Province			Postal Code	
Student Lives With 🗌 Mother & Father 🗌 Mother 🔤 Father 🔤 Caregiver 🔲 Other							
Please Note: If a custody agreement is in place, a copy of the agreement must accompany this application. If parents have shared/joint custody, both parents must sign the application form and supporting documents.							
OTHER INFORMATION:							
(Use this space, or attach additional papers with other information you consider relevant to the application process):							
MEDICAL INFORMATION: Students with medical conditions and/or life threatening allergies (ie: anaphylaxis) that may require immediate action must complete a school URIS medical plan (health information remains in student file)							
Medical conditions that may require immediate action:							
Allergies that may require immediate action:							

STUDENT HISTORY:						
The King's School is not presently able to provide services for significant psychological, cognitive, behavioural or physical disabilities						
Has student received:	Please include a copy of any documentation for plans indicated					
	□ Resource assistance □IEP/AEP/ALP/SSP □ IBP/BIP □ Speech □ Occupational Therapy					
	□ Level 2 or 3 funded □ School Psychology □ Gifted/Enrichment □ None					
Has student ever:	□ Repeated any grade/course □Been suspended					
	□ Been refused admission to, or dismissed/expelled from another school □ None					
Current School/Child Care Facility Name Phone Number						
Last grade completed:	(include copy of most recent report card or transcript)					
Name of Agency/Suppo	rt Service	Contact Person				
Reason for Service		Phone Number				
Please attach further documentation on a separate piece of paper.						
		d above and The King's School regarding services received by the				
agency. I may withdraw this consent at any time by notifying the school in writing. Initial to the right:						
TERMS AND CONDITIONS OF REGISTRATION			Initial:			
(Policies below available on www.thekingsschool.ca or by hard copy upon request.) I declare the information that I have provided on this form is complete and accurate. I will promptly notify the school of any						
changes to the information on this form.						
I understand failure to disclose pertinent information (ie. resource needs, medical issues, behavioural problems or past and						
present circumstances that in the opinion of the administration directly impacts the overall well-being of the student and the						
student community) may result in the rescission of the enrolment status of the applicant student at the time the information						
comes to the attention of the administration.						
I understand this may result in the mandatory immediate withdrawal of a student.						
I understand failure to accurately inform Administration about a change in needs may lead to the discontinuation of the school's						
ability to meet the student's needs in the future. This may result in the mandatory withdrawal of the student.						
I have read the 'Statement of Faith'. By choosing The King's School, we agree to respect The King's School's 'Statement of Faith'						
and agree to the transmission of the Christian perspective as it outlines.						
I have read and understood the 'Code of Conduct Policy' and understand its terms and conditions.						
I agree to abide by these terms and conditions and support The King's School staff as it seeks to carry them out.						
I have read and understood the 'Tuition Policy' and understand its terms and conditions.						
I agree to abide by these terms and conditions and support The King's School staff as it seeks to carry them out. I understand that The King's School is a uniform school and if my child is given an offer of admission, I agree to abide by the						
policy in place and will support The King's School staff as it seeks to carry it out.						

The King's School exists primarily to spread a passion for the glory of God through Jesus Christ to every nation and every generation. Inspiring and equipping students in a Christ-centred learning environment to live to their fullest potential academically, spiritually, relationally, vocationally, physically and in personal character.

Print Name:	Signature:	Date:
Print Name:	Signature:	Date:

NOTES: It is the Parent/Caregiver's responsibility to notify Manitoba Education if the enrolment situation of their child(ren) changes during the school year. Applications receive consideration provided The King's School has the necessary resources to support the student's needs.

Information collected will be limited to that required for the purpose(s) identified by the school. The school is committed to collecting personal information in a fair, open and lawful manner. Personal information shall not be used or disclosed for purposes other than those for which it was collected, except with the consent of the person or as required by law.