





Seneca Hill Private School

33 Overland Drive
Toronto, Ontario M3C 2C3
T. 416-499-8790 | F. 416-499-4683

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Application for Admission

Domestic

International

Applying to Grade ____ Beginning September ____

1 Applicant's Information

LAST NAME			FIRST NAME			PREFERRED FIRST NAME		
DATE OF BIRTH MM DD YY			<input type="radio"/> MALE			<input type="radio"/> FEMALE		
FIRST LANGUAGE			OTHER LANGUAGES					
COUNTRY(IES) OF CITIZENSHIP			APPLICANT'S EMAIL					
DATE OF ENTRY TO CANADA MM DD YY <small>(International Applicants)</small>			STATUS IN CANADA <input type="radio"/> PERMANENT <input type="radio"/> TEMPORARY <input type="radio"/> OTHER _____					

2 Applicant's Present School

SCHOOL NAME			CURRENT GRADE														
ADDRESS			CITY														
PROVINCE			POSTAL CODE			COUNTRY											
TYPE OF SCHOOL			<input type="radio"/> PUBLIC			<input type="radio"/> SEPARATE			<input type="radio"/> PRIVATE			<input type="radio"/> NURSERY			<input type="radio"/> DAYCARE		
LANGUAGE OF INSTRUCTION			<input type="radio"/> PREDOMINANTLY ENGLISH			<input type="radio"/> PREDOMINANTLY FRENCH			<input type="radio"/> OTHER _____								
NUMBER OF YEARS AT CURRENT SCHOOL _____																	

3 Applicant's Siblings

DOES THE APPLICANT HAVE SIBLINGS CURRENTLY ATTENDING SENECA HILL? YES NO

PLEASE LIST APPLICANT'S SIBLINGS

NAME	AGE/GRADE
NAME	AGE/GRADE
NAME	AGE/GRADE

IS THE APPLICANT'S PARENT AN ALUM(US/A) / STAFF MEMBER OF SENECA HILL? YES NO

IF YES, NAME(S) AND YEARS AT SENECA HILL _____

4 Family Information

PARENT / GUARDIAN 1: RELATIONSHIP _____		PARENT / GUARDIAN 2: RELATIONSHIP _____		
<input type="radio"/> MR. <input type="radio"/> MRS. <input type="radio"/> MS. <input type="radio"/> DR. <input type="radio"/> OTHER _____		<input type="radio"/> MR. <input type="radio"/> MRS. <input type="radio"/> MS. <input type="radio"/> DR. <input type="radio"/> OTHER _____		
LAST NAME		LAST NAME		
FIRST NAME		FIRST NAME		
HOME ADDRESS		HOME ADDRESS		
CITY	PROVINCE	CITY	PROVINCE	
POSTAL CODE	COUNTRY	POSTAL CODE	COUNTRY	
HOME TEL.		HOME TEL.		
CELL TEL.		CELL TEL.		
BUS. TEL.		BUS. TEL.		
PREFERRED EMAIL		PREFERRED EMAIL		
EMPLOYER	PROFESSION	EMPLOYER	PROFESSION	
POSITION		POSITION		
APPLICANT LIVES WITH:				
		<input type="radio"/> BOTH PARENTS/GUARDIANS	<input type="radio"/> PARENT/GUARDIAN 1	<input type="radio"/> PARENT/GUARDIAN 2
IF PARENTS ARE NOT LIVING TOGETHER, WHO IS THE CUSTODIAL PARENT/LEGAL GUARDIAN?				
		<input type="radio"/> PARENT 1	<input type="radio"/> PARENT 2	<input type="radio"/> JOINT CUSTODY
CORRESPONDENCE SHOULD BE SENT TO:				
		<input type="radio"/> BOTH PARENTS/GUARDIANS	<input type="radio"/> PARENT/GUARDIAN 1	<input type="radio"/> PARENT/GUARDIAN 2

5 Questions for Parent/Guardian

WHY ARE YOU CONSIDERING SENECA HILL FOR YOUR SON/DAUGHTER?

WHAT DO YOU BELIEVE ARE YOUR CHILD'S STRENGTHS, RELEVANT WEAKNESSES, TALENTS AND INTERESTS?

WHY ARE YOU CONSIDERING LEAVING YOUR CURRENT SCHOOL?

6 Questions for Applicant

NAME _____

APPLYING TO GRADE _____

WE ARE INTERESTED IN GETTING TO KNOW YOU. PLEASE COMPLETE THE FOLLOWING PHRASES. THERE IS NO RIGHT OR WRONG ANSWER, SO JUST BE YOURSELF AND HAVE FUN!

WHAT I MOST ENJOY DOING IS _____

THE PERSON I WOULD MOST LIKE TO MEET IS _____

I WISH PEOPLE WOULD _____

A BOOK THAT HAS CHANGED ME IS _____

WHAT PEOPLE LIKE MOST ABOUT ME IS _____

THE THING THAT REALLY UPSETS ME IS _____

A FAMILY TRADITION IS _____

IT'S FUN TO DREAM ABOUT _____

A RECENT CHALLENGE I OVERCAME IS _____

A QUALITY I SEEK IN FRIENDS IS _____

I WOULD BE HAPPIER IF _____

MY THEME SONG IS _____

SOMETHING SURPRISING ABOUT ME IS _____

TEACHERS OFTEN TELL ME _____

IF I WORE A SIGN, IT WOULD SAY _____

THE THING I LIKE BEST ABOUT LEARNING A NEW LANGUAGE IS _____

ADDITIONAL COMMENTS? (PLEASE SHARE ANY HOBBIES, COMPETITIVE SPORTS, ETC. THAT YOUR CHILD PARTICIPATES IN.) _____

7 Emergency Contact Information

▶ THIS EMERGENCY CONTACT INFORMATION IS OUR DIRECT LINE OF COMMUNICATION TO YOU WHEN YOU ARE NEEDED IN AN EMERGENCY.

PARENT 1 INFORMATION

LAST NAME: _____ FIRST NAME: _____

HOME ADDRESS: _____ CITY/PROVINCE/POSTAL CODE: _____

PLACE OF EMPLOYMENT: _____ POSITION: _____ WORK PHONE: _____

HOME PHONE: _____ CELL PHONE: _____

EMAIL: _____

PARENT 2 INFORMATION

LAST NAME: _____ FIRST NAME: _____

HOME ADDRESS: _____ CITY/PROVINCE/POSTAL CODE: _____

PLACE OF EMPLOYMENT: _____ POSITION: _____ WORK PHONE: _____

HOME PHONE: _____ CELL PHONE: _____

EMAIL: _____

ALTERNATIVE CONTACT #1

NAME: _____ RELATION: _____ PHONE: _____

CELL PHONE: _____ ADDRESS: _____

ALTERNATIVE CONTACT #2

NAME: _____ RELATION: _____ PHONE: _____

CELL PHONE: _____ ADDRESS: _____

▶ IT IS THE RESPONSIBILITY OF THE PARENT TO INFORM THE SCHOOL OF ANY CHANGES IN THE INFORMATION LISTED ON THIS FORM.

8 Other Information

HOW DID YOU LEARN ABOUT SENECA HILL? (CHECK ALL THAT APPLY)

- INTERNET SEARCH / SENECA HILL WEBSITE REFERRED BY FRIENDS OR ACQUAINTANCES REFERRED BY SENECA HILL ALUMNI
- GENERAL REPUTATION SIBLING OR RELATIVE ATTENDED PARENT IS ALUMNUS(A)
- REFERRED BY RELOCATION AGENCY / EDUCATIONAL CONSULTANT
- ADVERTISEMENT (PLEASE SPECIFY) _____
- OTHER (PLEASE SPECIFY) _____

WHAT WERE THE DECIDING FACTORS IN YOUR CHOOSING TO APPLY TO SENECA HILL? (CHECK ALL THAT APPLY)

- HIGH ACADEMIC STANDARDS DIVERSE COMMUNITY SAFE STUDENT ENVIRONMENT
- CARING AND NURTURING ENVIRONMENT COEDUCATIONAL INDIVIDUAL STUDENT ATTENTION
- INTERNATIONAL PERSPECTIVE CO-CURRICULAR ACTIVITIES (E.G. ATHLETICS, ARTS)
- OTHER (PLEASE SPECIFY) _____

9 Acknowledgements

PLEASE STATE ANY ALLERGIES: _____ ANY OTHER DIETARY RESTRICTIONS? _____

IN REGARDS TO THE CANADIAN ANTI-SPAM LEGISLATION (CASL), I PROVIDE MY CONSENT TO RECEIVE COMMUNICATION VIA EMAIL (INCLUDING NEWSLETTERS, UPDATES, SCHOOL INFORMATION, ETC.) FROM SENECA HILL.

- YES NO

AS ALIGNED WITH SENECA HILL'S STRATEGIC PLAN, ADVERTISING - IN THE FORM OF AN ENHANCED WEBSITE, FACEBOOK PAGE, BROCHURES AND OTHER PROMOTIONAL MATERIALS - OF SCHOOL FACILITIES AND STUDENTS WOULD LIKE TO BE PURSUED. PLEASE INDICATE WHETHER YOU PROVIDE SENECA HILL WITH YOUR CONSENT TO PHOTOGRAPH YOUR CHILD AND INCLUDE THEM IN OUR PROMOTIONAL ACTIVITIES.

- YES NO

10 Applicant Checklist

PLEASE COMPLETE THE FOLLOWING:

- PROVIDE A COMPLETED SENECA HILL PRIVATE SCHOOL APPLICATION FORM
- PAY THE NON-REFUNDABLE APPLICATION FEE OF \$250 PAYABLE TO SENECA HILL PRIVATE SCHOOL
- PROVIDE A RECENT PHOTO OF THE APPLICANT (ATTACHED TO FIRST PAGE OF APPLICATION)
- PROVIDE A COPY OF PROOF OF DATE OF BIRTH (E.G. BIRTH CERTIFICATE, PASSPORT)
- PROVIDE A COPY OF THE CHILD'S IMMUNIZATION RECORDS
- PROVIDE A COPY OF THE CHILD'S HEALTH CARD (*if applicable*)
- PROVIDE COPIES OF TWO MOST RECENT END-OF-YEAR REPORT CARDS
- ARRANGE TO SPEND A DAY AT SENECA HILL

I AGREE TO THE TERMS AND CONDITIONS OF SENECA HILL PRIVATE SCHOOL'S APPLICATION POLICIES, AND CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS CORRECT. THE PRINCIPAL RESERVES THE RIGHT TO ASK FOR THE REMOVAL OF ANY STUDENT WHO FAILS TO REACH STANDARDS EXPECTED OF THEM BY THE SCHOOL IN EITHER WORK OR CONDUCT. ADHERENCE TO ALL SCHOOL POLICIES (ACADEMIC, CODE OF CONDUCT, FINANCIAL AND OTHERS) IS REQUIRED.

- YES NO

Signature of parent/guardian: _____ Date: _____

Return to: **ADMISSIONS**

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Canada

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