ARCHBISHOP CARNEY REGIONAL SECONDARY SCHOOL
1335 Dominion Avenue, Port Coquitlam, BC V3B 8G7
Phone: (604) 942-7465 Fax: (604) 942-5289 www.acrss.org

INTERNATIONAL STUDENT APPLICATION

To Whom It May Concern:

Thank you for your interest in the International Educational Programs at Archbishop Carney Regional Secondary School. We have developed programs that support both the learning of the English language and the academic courses that comprise the British Columbia Educational Curriculum.

The following documents are required before your application is considered:

1. Completed International Student Application Form
2. Completed and signed Refund Policy and Terms of Agreement
3. Copy of report card translated into English from the current and past one year of study
4. Copy of relevant rewards and certificates
5. Copy of the student's passport

Once these documents are received, your application will be evaluated to determine if you qualify for an interview. Students of successful interviews will be offered a space in our program. Upon receipt of the completed application form and payment of full tuition and miscellaneous fees, the necessary authorized immigration documentation will be written.

All tuition and fees are non-refundable after the clearing of the initial deposit in the school's bank account, with the exception of an application for a visa that is denied by Immigration Canadian.

If you have any questions or concerns please feel free to contact the International Educational Programs Director. The contact information is as follows:

Archbishop Carney Regional Secondary School
Attention: **Mr. John Borzillo**
1335 Dominion Avenue
Port Coquitlam, British Columbia V3B 8G7
Phone: (604) 942-7465
Fax: (604) 942-5289
Email: borzillo@acrss.org

Thank you for your interest in our program. We look forward to hearing from you soon.

Sincerely,

Mr. John Borzillo
Director of International Educational Programs

ARCHBISHOP CARNEY REGIONAL SECONDARY SCHOOL
1335 Dominion Avenue, Port Coquitlam, BC V3B 8G7
Phone: (604) 942-7465 Fax: (604) 942-5289 www.acrss.org

INTERNATIONAL STUDENT APPLICATION FORM 2020-2021

SECTION 1 - STUDENT INFORMATION

Applying for school beginning: Sept. 20 ____ (YY)

Grade Completed: _____ Current Grade: _____ Grade Placement Request: ☐8 ☐9 ☐10 ☐11 ☐12

Last Name: _____ First Name: _____ English Name: _____

Date of Birth:_____ （yy/mm/dd） Gender: ☐M ☐F Citizenship:_____

Permanent Address:_____ Country:_____

Post Code:_____ Religion:_____ Phone Number:_____

Contact Type: Skype, WeChat, KakaoTalk, etc. _____ Contact number: _____

Email:_____ Language of instruction at current school:_____

English level: ☐Beginner ☐Intermediate ☐Upper-intermediate ☐Advanced ☐Proficient

SECTION 2 - PARENT INFORMATION

Father: Last Name:_____ First Name:_____ Date of Birth: _____ （yy-mm-dd）

Phone number:_____ Email:_____

Mother: Last Name:_____ First Name:_____ Date of Birth: _____ （yy-mm-dd）

Phone number:_____ Email:_____

SECTION 3 - STUDENT PERSONALITY DESCRIPTION

☐Adaptable ☐Adventurous ☐Approachable ☐Confident ☐Cooperative ☐Flexible ☐Independent

☐Motivated ☐Outgoing ☐Respectful ☐Responsible ☐Sensitive ☐Serious ☐Shy ☐Studious ☐Traditional

SECTION 4 - STUDENT MEDICAL INFORMATION AND ACCOMMODATION

Canadian medical insurance will be covered from Sept 1st to June 30th of the academic year.

Describe your allergies, health concerns and regularly taken medication. _____

_____

Do you need assistance in finding a custodian? ☐Yes ☐No

Do you require homestay? ☐Yes ☐No

ARCHBISHOP CARNEY REGIONAL SECONDARY SCHOOL
1335 Dominion Avenue, Port Coquitlam, BC V3B 8G7
Phone: (604) 942-7465 Fax: (604) 942-5289 www.acrss.org

REFUND POLICY AND TERMS OF AGREEMENT

1. I understand that a successful experience in Archbishop Carney Regional Secondary School (ACRSS) International Education Programs requires regular class attendance, completion of all homework and assignments, and active participation in all activities offered by the programs.

2. I acknowledge that ACRSS reserves the rights to dismiss and return a student home, at the student's own expense and without tuition refund, for violating school rules.

3. The status of a new student (International vs. landed immigrant/resident) will be determined at the time of the application. The status will remain unchanged for the entire school year.

4. If a prospective student cannot obtain proper documentation from Immigration Canada, the student must provide a letter of rejection to the school. A full refund less $100 administration fee will be made. In any other circumstances, all tuition and fees are non-refundable after the clearing of the initial deposit in the school's bank account.

5. An international student who is accepted into ACRSS at the request of an approved agent must continue this relationship with this agency for the full school year.

6. While attending ACRSS, international students must reside with a natural parent, a legal custodian or homestay parent in the Lower Mainland of British Columbia.

7. A notarized letter from parents appointing the legal guardian AND a notarized letter from the custodian accepting responsibilities for the student are required to appoint a legal custodian. Parents are responsible for notifying the school of any changes regarding a student's custodianship and residence.

8. A student who is in violation of this agreement may be withdrawn from ACRSS and forfeit tuition paid.

- ☐ I agree that my child's host parents/custodian may sign the consent forms for chaperoned field trips or other activities offered by ACRSS.
- ☐ I have read, understood and agreed to abide by the school policies. I understand that any failure to comply with the school policies will result in withdrawing from the Archbishop Carney Regional Secondary School as an international student.
- ☐ I understand that all tuition and fees are non-refundable after the clearing of the initial deposit in the school's bank account, with the exception of an application for a visa that is denied by Immigration Canadian.
- ☐ I have read, understood and agreed to the above terms in the agreement.

Parent's signature: _____ Date: _____

Student's signature: _____ Date: _____