



## STUDENT APPLICATION

Date of Application \_\_\_\_\_

### Student Information

Name of Student \_\_\_\_\_

Surname

Given Names in full

Student Address \_\_\_\_\_ City \_\_\_\_\_

Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Phone # \_\_\_\_\_ Email \_\_\_\_\_

Student lives with:  Father & Mother  Father  Mother  Other

If other, explain: \_\_\_\_\_

Sex:  Male  Female Birthdate: \_\_\_\_\_(Month) \_\_\_\_\_(Day) \_\_\_\_\_(Year)

Name of most recent school or home school \_\_\_\_\_

School Jurisdiction \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Last Grade Completed \_\_\_\_\_ Date Left \_\_\_\_\_

Present Age \_\_\_\_\_ Desired Entry Date \_\_\_\_\_(M) \_\_\_\_\_(D) \_\_\_\_\_(Y)

Alberta Education requires documentation on every student's cumulative file relating to the Residents Board that school taxes are allocated to. Please indicate to which school tax jurisdiction your property taxes are paid.

High Prairie School Division - Catholic

High Prairie School Division - Public

How did you hear about B.L.C.L.C.? \_\_\_\_\_

Reason for selecting B.L.C.L.C.? \_\_\_\_\_

**FNMI Status** Please indicate if you are a member of one of the following native status groups:

Status Indian/First Nations

Métis

Non Status Indian/First Nations

Inuit

### Family Information

#### Father/Guardian

Surname \_\_\_\_\_ Given Name \_\_\_\_\_

Marital Status: \_\_\_\_\_

Street Address: \_\_\_\_\_ City \_\_\_\_\_

Province \_\_\_\_\_ Postal Code \_\_\_\_\_ E-mail Address \_\_\_\_\_



4915 – 52 Ave Box 771 High Prairie, AB T0G 1E0 PH: 780-523-3398

Email:biglakesclc@gmail.com

Home Phone # \_\_\_\_\_ Cell # \_\_\_\_\_

Occupation \_\_\_\_\_

Employer Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone # \_\_\_\_\_

### Mother/Guardian

Surname \_\_\_\_\_ Given Name \_\_\_\_\_

Marital Status: \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_

Province \_\_\_\_\_ Postal Code \_\_\_\_\_ E-mail Address \_\_\_\_\_

Home Phone # \_\_\_\_\_ Cell # \_\_\_\_\_

Occupation \_\_\_\_\_

Employer Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone # \_\_\_\_\_

### Scholastic Information

Has the student failed any grade?  Yes  No

If yes, what grade? \_\_\_\_\_ Explain \_\_\_\_\_

Please indicate academic level of pupil's previous work:

Excellent  Good  Average  Poor

Has the student ever been expelled, dismissed, suspended, or refused admission to another school?

Yes  No

If yes, please explain \_\_\_\_\_

Has the student had any disciplinary difficulties?  Yes  No

If yes, please explain \_\_\_\_\_

Has the student ever been in trouble with the law, arrested, etc.?  Yes  No

If yes, please explain \_\_\_\_\_



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### Medical Information

Please state any medical conditions (e.g. allergies/asthma) that B.L.C.L.C. should be aware of:

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AHC# \_\_\_\_\_

Are your child’s immunizations current?  Yes  No

Family Physician: \_\_\_\_\_ Phone \_\_\_\_\_

First Emergency Contact: \_\_\_\_\_

Name

Home Phone #

Employer

Work Phone #

Relationship to student

Second Emergency Contact: \_\_\_\_\_

Name

Home Phone #

Employer

Work Phone #

Relationship to student

### Christian Faith

Church Attending: \_\_\_\_\_

Pastor: \_\_\_\_\_

Church Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Number of Years Attending: \_\_\_\_\_

If less than 1 year, list previous Church: \_\_\_\_\_

Family Attends Church  Weekly  Semi-Weekly  Monthly

Father Born Again Christian?:  Yes  No

Mother Born Again Christian?:  Yes  No

Has the student made a profession of faith in Christ?  Yes  No



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## Parent Questionnaire

1. In what ways do you expect that your son or daughter will benefit from an education at B.L.C.L.C.? \_\_\_\_\_  
\_\_\_\_\_

2. In what ways do you expect that your son or daughter will contribute to the life of the school?  
\_\_\_\_\_  
\_\_\_\_\_

3. What special talents or skills does your child have? Please give examples.  
\_\_\_\_\_  
\_\_\_\_\_

4. Are there any influences at home or at his/her present school that may initially negatively influence your son's or daughter's performance at B.L.C.L.C.? \_\_\_\_\_  
\_\_\_\_\_

5. Are there any further comments regarding your son/daughter/family information that you wish to make?  
\_\_\_\_\_  
\_\_\_\_\_

6. Do you or your family have any previous connections with B.L.C.L.C.? \_\_\_\_\_  
\_\_\_\_\_

## Student Questionnaire

- Students applying for Grades K - 4 should answer questions 1 - 8 (with parent's help)
- Students applying for Grades 5 - 8 should answer questions 1 - 10
- Students applying for Grades 9 - 12 should answer all questions.

1. What do you enjoy most about the Church activities you attend? (S.S., Youth, Kids Club, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

2. What are your favourite books?  
\_\_\_\_\_



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3. What are your favourite school subjects?

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4. What sports do you most enjoy?

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5. List any out-of-school lessons or special programs or activities in which you are involved.

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6. Who is your hero? Why?

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7. What chores do you perform regularly at home?

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8. What activities do you like to engage in during your leisure time?

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9. List your extra-curricular involvements in your present school.

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10. List your favourite T.V. programs and musical groups/performers.

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11. Describe your creative talents and how you express them.

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12. Are you involved in any community service programs? Please specify.

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13. Describe any special academic, athletic or leadership awards or honours you have won.

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14. List areas of ministry involvement in your church.

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THIS SECTION TO BE COMPLETED BY ALL STUDENTS APPLYING FOR GRADES 5 THROUGH 9.

Write a brief personal testimony of what God is doing in your own life.

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