

# EDMONTON ACADEMY APPLICATION FOR ADMISSION

Student's Name: \_\_\_\_\_ Sex \_\_\_\_\_ D.O.B. \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Age: \_\_\_\_\_  
year      month      day

Alberta Personal Health Number: \_\_\_\_\_

Parents' Name: \_\_\_\_\_ Date of Application: \_\_\_\_\_

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

Postal Code: \_\_\_\_\_

Citizenship of Student: \_\_\_\_\_

Telephone: Residence: \_\_\_\_\_ Business Mother: \_\_\_\_\_

Fax: \_\_\_\_\_ Business Father: \_\_\_\_\_

Cell Phone(s): \_\_\_\_\_

Family Email Address (Optional): \_\_\_\_\_

Last School Attended: \_\_\_\_\_ Grade: \_\_\_\_\_

School Board Jurisdiction: \_\_\_\_\_

## SCHOOL HISTORY

Grade	School Attended	Year	Problems / Services Provided
K.Garten			
1st			
2nd			
3rd			
4th			
5th			
6th			
7th			
8th			
9th			

Name of High School(s) attended and list of Credits Received (Attach high school transcript if available): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What grade (or special program) is your child currently (as of this date) enrolled in? \_\_\_\_\_

Please describe briefly any special programs (special class, learning assistance, tutoring) that our child has been enrolled in: \_\_\_\_\_

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### DEVELOPMENTAL MILESTONES

How old when first walked? \_\_\_\_\_

How old when first single words spoken? \_\_\_\_\_ Sentences? \_\_\_\_\_

Are there any articulation problems?  Yes  No Has the child received speech therapy  Yes  No

If yes, please give details: \_\_\_\_\_

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Has the child ever exhibited high distractibility or motor hyperactivity?  Yes  No

If yes, please give details: \_\_\_\_\_

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### VISION AND HEARING

When was the child's vision last tested? \_\_\_\_\_

By whom? \_\_\_\_\_ Results? \_\_\_\_\_

When was the child's hearing last tested? \_\_\_\_\_

By whom? \_\_\_\_\_ Results? \_\_\_\_\_

### FAMILY BACKGROUND

Father's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Home Address (if different from student): \_\_\_\_\_

Community Activities: \_\_\_\_\_

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Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Home Address (if different from student): \_\_\_\_\_

Community Activities: \_\_\_\_\_

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Has there been a divorce in the family?  Yes  No

Please give details if you think they are important: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

If yes, with whom does the child reside? \_\_\_\_\_

Has there been a death in the immediate family?  Yes  No

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

Is the child adopted?  Yes  No If yes, age child was adopted: \_\_\_\_\_

Please list the child's siblings:

Age	Sex	Name	Explain if any other child(ren) experience inordinate learning problems in school

**ILLNESSES**

Has the child ever been seriously ill (high fevers, jaundice, pneumonia, allergies, etc.)?  Yes  No

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

\_\_\_\_\_  
\_\_\_\_\_

Has the child ever been involved in a serious accident (involving head injuries, etc.?)  Yes  No

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

\_\_\_\_\_  
\_\_\_\_\_

Other than a **learning disability**, has your child been diagnosed with any other medical/educational condition?  Yes  No

If yes, please explain the diagnosis, who made the diagnosis, date of diagnosis, and the impact, if any, on your child's school program \_\_\_\_\_

\_\_\_\_\_

## MEDICATION

Is the child currently taking any medication  Yes  No

If yes, please explain and list medication: \_\_\_\_\_

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## SOCIAL AND EMOTIONAL LIFE

Does the child make friends easily?  Yes  No

Are most of his/her friends:  Older  Younger  Same Age

Has the child ever suffered prolonged bouts of depression?  Yes  No

When upset, does he/she:  Withdraw  Become destructive  Become verbally abusive  
 Become physically aggressive  Cry

Other: \_\_\_\_\_

Has the child ever received counseling from a psychologist or psychiatrist?  Yes  No

If yes, by whom? \_\_\_\_\_ Where? \_\_\_\_\_

Why? \_\_\_\_\_

Has the child ever been suspended or expelled from school?  Yes  No

If yes, why? \_\_\_\_\_

Has the child ever been in trouble with the community or police?  Yes  No

If yes, why? \_\_\_\_\_

What are the child's chief dislikes? \_\_\_\_\_

What are the child's interests, hobbies and enjoyed activities? \_\_\_\_\_

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Describe the child's feelings about him/herself (self-concept) \_\_\_\_\_

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What alternate programs have been offered to your child by your local school board? \_\_\_\_\_

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List any educational and psychological testing available at this time relative to your school: (Please provide)

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**CURRENT SCHOOL INFORMATION**

Name of Current School: \_\_\_\_\_ Dates Attended: (19)\_\_\_\_\_ to 20\_\_\_\_\_

Phone Number: \_\_\_\_\_ Teacher Name & Role: \_\_\_\_\_

Last grade completed: \_\_\_\_\_ Was the student promoted to next grade? \_\_\_\_\_

Submission of this signed application includes permission for a representative of Edmonton Academy to contact the above school and teacher       Yes       No

## PRIVACY STATEMENT

I/We \_\_\_\_\_ (the undersigned), consent to allow Edmonton Academy to release, collect, use or disclose personal information for its operational and administrative purposes, including, but not limited to:

- Enrolment eligibility and pre-assessments
- Learning Assessments
- Provision of student counseling
- Ensuring student health and safety
- Special events
- Student/Family Liaison
- Enrolment development
- Fundraising initiatives
- Finance administration requirements

I/We understand that Edmonton Academy is subject to provincial and federal privacy legislation and has in place a Policy on Privacy to ensure compliance with privacy legislation and standards.

I/We are aware of the risks and benefits associated with consenting or not consenting to collection that I may revoke my consent at any time by providing a signed, written statement of revocation to Edmonton Academy.

SIGNATURE OF PARENT(S) / LEGAL GUARDIAN

\_\_\_\_\_  
\_\_\_\_\_

DATE:: \_\_\_\_\_

PLEASE MAIL THIS COMPLETED APPLICATION FORM AND RELEVANT DOCUMENTATION TO:

**EDMONTON ACADEMY  
UNIT 2, 810 SADDLEBACK RD.  
EDMONTON, AB T6J 4W4**

### **‘CONSENT TO RELEASE’**

**Please send a signed ‘Consent to Release’ form to your child’s school/agency/psychologist so they will send copies of your child’s records/assessments directly to Edmonton Academy. Once all information has been received, an interview will be arranged to further explore enrolment.**