



Christ Church Cathedral Childcare

1670 Richardson Street
Victoria, British Columbia
V8S 1R4

Telephone (250) 383-5132
Facsimile (250) 383-5188
jk@cathedralschool.ca

Application Package

PHILOSOPHY

To provide an Anglican based junior kindergarten program offering enrichment for young children's spiritual, social, emotional, physical and intellectual growth.

ADMISSIONS POLICY

A \$50.00 non-refundable administration fee, payable by cheque to Christ Church Cathedral Educational Society, must accompany this application in order for it to be processed.

Please note that the submission of the application does not constitute automatic acceptance.

Acceptance for space is based on the following:

1. Siblings of children registered at our main school or childcare centre will have priority.
2. Other remaining spaces will be filled on a first come, first admitted basis (date application is received by the school office).
3. Within both categories above, priority will be given first to contributing members of the Anglican Church and then children of other Christian denominations.
4. Christ Church Cathedral Childcare reserves the right to waive the first come, first admitted criterion in order to achieve an appropriate balance in the class, including gender and the social, emotional and intellectual development of all of the students.

When the child has been accepted into Christ Church Cathedral Childcare, the family will be required to complete a registration form and a fee payment policy form. These forms must be accompanied by a copy of your child's birth certificate and immunization records.

HOURS OF OPERATION and FEE SCHEDULE 2015/2016

Two options are available:

- | | | |
|--------------------------|--------------------|--------------------------|
| 1. 9:00 a.m. – 4:00 p.m. | \$875.00 per month | <input type="checkbox"/> |
| 2. 7:30 a.m. – 5:30 p.m. | \$950.00 per month | <input type="checkbox"/> |

Please note there is an **Anglican discount** of \$50.00 per month for part day or full day.

**Please note that fees are subject to change*



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Preferred Entry Date: _____

Child's Name: _____ Male ____ Female ____

First: _____ Middle: _____ Surname: _____

Legal Name (if different from above): _____

Name Child is called (if different from above): _____

Address: _____ Date of Birth: _____

City: _____ Postal Code: _____ Place of Birth: _____

Home Phone Number: _____ Citizenship: _____

Anglican Church Parish (if applicable): _____ Envelope Number: _____

Mother's Name: _____

Address (if different from child's address): _____

Home Phone: _____ Business: _____ Cell: _____

Email: _____ Citizenship: _____

Father's Name: _____

Address (if different from child's address): _____

Home Phone: _____ Business: _____ Cell: _____

Email: _____ Citizenship: _____

To be completed when the applicant has attended other daycare or childcare facilities.

Daycares Attended – List the last two facilities, starting with the most recent.

<u>School</u>	<u>Location</u>	<u>Date of Attendance</u>	<u>Teacher or counsellor</u>

List your child's interests and hobbies (i.e., Lego building, swimming, art, etc.)



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Supporting your child at Christ Church Cathedral School

The following section is necessary so the School can begin to assess the intellectual, physical, social and emotional needs of your child in order to determine our capacity to properly support both your child and the classroom.

Has your son or daughter reached their developmental milestones since birth? Yes_____ No_____

If no, please provide details.

Has your child had any assessments completed by Psychologists, Pediatricians, Occupational Therapists, Speech and Language Therapists, Educational Specialists, etc. or been enrolled in any special developmental programs as a young toddler? Yes_____ No_____

If yes, please submit any relevant assessment/health services documents. Enclosed _____ Forthcoming _____

Has your child experienced behavioural problems? Yes_____ No_____ If yes, please provide details and any necessary documentation.

Educationally relevant medical and health information: (if yes to any of these questions, please provide the necessary documentation.)

1. Does your child have visual or hearing impairment? Yes_____ No_____
2. Has your child received a speech-language assessment or therapy? Yes_____ No_____
3. Does your child take any medications on a regular basis? Yes_____ No_____
4. Is your child able to participate in an active multi-kinaesthetic educational program? Yes___ No ____
If you answer NO, please explain why.

Is there any other information about your child that you feel the Childcare should know in order to help him/her integrate well into the School (e.g., social, medical situations, allergies)?



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This application must be returned with the non-refundable application fee of \$50 in order for your child to be placed on the Christ Church Cathedral Childcare list.

Please use one form for each child you wish to enrol.

I understand this is only an application and does not constitute registration. I understand that the omission of relevant and significant information will cause this application to be withdrawn.

(All parents/guardians must sign.)

Parent or Guardian #1 Name: _____

Signature

Date

Parent or Guardian #2 Name: _____

Signature

Date

Date received at the School: _____