



INTERNATIONAL STUDENT APPLICATION FOR ADMISSION

PLEASE complete and 'save as' to forward by email

Date of Application: _____

Name of Applicant: _____ Date of Birth: _____

Current Grade: _____ Grade Applied for: _____

Note: Minimum of Gr.11 and Gr. 12 must be completed at AHPS to graduate with high school diploma.

Education Agency: _____

Agent: _____

Address: _____

Email: _____ Tel: _____

Please include the following with your application:

- Completed Application
- CDN \$300.00 application fee (non-refundable)
- All transcripts, certificates or school records from current year and previous year in English
- IELTS/TOEFL Results (if available)
- 2 letters of reference from teacher or principal
- Copy of student's passport
- Copy of parent's passports

Payment Options for Application Fee

Amount: \$300.00

Visa Mastercard

Name on Card: _____ Expiry Date: _____ CVC: _____

Billing Address: _____

Or Click below to receive an invoice with a secure payment link

Please provide email address for invoice to be sent _____

Program requirement for new students

I understand that new students are required to attend the Jump Start program held the week prior to the start of the school year.



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KINDERGARTEN TO GRADE 12 **PLEASE Complete**

(Please complete one application for each student)

STUDENT INFORMATION

Name: _____
First Name Middle Name Last Name

Address: _____

Email: _____ Skype / WeChat / WhatsApp: _____
(Please indicate: Skype/WhatsApp/WeChat, etc.)

Date of Birth: _____ Gender: Male Female

Citizenship - please specify: _____ Applying for school year: _____

Entering Grade: _____

EDUCATION

Current school: _____ Email: _____

Address: _____

Date of entrance: _____

Mother or Female Guardian Same address & # as student

Name: _____
First Name Middle Name Last Name

Date of Birth: _____

Address: _____

Street City Province/Territory Postal Code Country

Cell phone: _____ Email: _____

Additional Contact information: _____
(Please indicate: Skype/WhatsApp/WeChat, etc.)

Occupation/Profession: _____ Employer: _____

Business Name: _____ Position: _____

Business Phone: _____ Business email: _____



INTERNATIONAL STUDENT APPLICATION FOR ADMISSION

Father or Male Guardian Same address & # as student

Name: _____
First Name Middle Name Last Name

Date of Birth: _____

Address: _____
Street City Province/Territory Postal Code Country

Cell Phone: _____ Home E-mail: _____

Occupation/Profession: _____ Employer: _____

Business Name: _____ Position: _____

Business Phone: _____ Business Email: _____

Additional Contact information: _____
(Please indicate: Skype/WhatsApp/WeChat, etc.)

Citizenship - Please specify: _____

PARENT AND FAMILY INFORMATION

Student resides with? Both parents Mother Father Guardian

Please forward correspondence to: Both parents Mother Father Guardian

Custody agreement in place? Yes No

SIBLING INFORMATION

Name: _____
First Name Middle Initial Last Name Age

Current School: _____

Additional Sibling

Name: _____
First Name Middle Initial Last Name Age

Current School: _____



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Emergency Contact Information

Name: _____ Relationship: _____

Cell phone: _____ Other Contact info: _____

In order for us to accurately determine our ability to provide the required level of support to each, individual student, it is important that the following questions are answered with as much detail as possible.

APPLICANT'S EDUCATIONAL HISTORY – GRADE 1 TO 12

Names and addresses of schools attended within the last three years:

School: _____

Phone: _____ Dates Attended: _____

School: _____

Phone: _____ Dates Attended: _____

Has the applicant ever advanced a grade? Yes No

If yes, which grade? _____

Has the applicant ever repeated a grade? Yes No

If yes, which grade? _____

Please indicate languages studied and level of proficiency for each:

English: Beginner Intermediate Fluent

Other: _____ Beginner Intermediate Fluent

Other: _____ Beginner Intermediate Fluent

Has the student ever been designated "Special Needs" (ie Gifted, Learning Disability, ADHD, etc)?

Yes No

If yes, please describe: _____



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Has the applicant ever had a psychological-education (Psych-Ed) assessment?

Yes No

If, yes, provide the date of the assessment: _____

Name of Physician conducting assessment: _____

If the applicant has received or is receiving counseling due to a personal problem or event, please share information about the assistance so we can better understand and respond to your child's unique needs. (Attach reports)

Has the applicant ever been prescribed any medication to be taken on a regular basis?

Yes No

Name of medication: _____

Has the applicant ever been the subject of serious disciplinary procedure at school or in the community?

Yes No

Please detail any disciplinary matters: _____

Remarks from the family (i.e. is there anything you would like to add that has not been covered in the application?):



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APPLICANT INFORMATION – to be completed by the student

Within the past year, which books have you read that have particularly appealed to you, and why?

Have you achieved any awards, honors, and achievements in the area of academics or athletics? If so, please list them below:

What are your personal passions?

Please list extracurricular, athletic, arts and community activities in which you have been involved during **the past two years**. □

Activity	Years involved	Level/Leadership position
_____	_____	_____
_____	_____	_____
_____	_____	_____

How do you feel you can contribute to the Aberdeen Hall school community?



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I/We consent to having Aberdeen Hall Preparatory School collect personal information that may include student identification, birth certificate, behavioral, academic, and health information. I/We further consent to the use and disclosure of information contained in this form and otherwise collected by Aberdeen Hall Preparatory School for the purpose of establishing, maintaining and terminating the student's or parent's relationship with Aberdeen Hall Preparatory School.

Parent/Guardian: _____

Date: _____

Applicant: _____

Date: _____

*If you have a business
card, please attach
it here.*

By typing your name and date above and submitting this form by email you are agreeing to the above statement.