

Mother Teresa



Middle School

A Jesuit Academy

Application Form

For Office Use Only

Registrar _____ Date _____ Start Date _____

Documents Verified: Birth Certificate Saskatchewan Health Services Card

Program: English Ministry# _____

Legal Last Name _____ (as per birth certificate)

Legal First Name _____ Name Used _____ Middle Name _____

Apartment # _____ House # _____ Street/Box # _____

Regina, SK **or** _____ Postal Code _____

Home Phone # _____

Gender: Male Female Birth Date _____ Grade Level _____
Month Day Year

Previous Elementary School(s): _____

Saskatchewan Health Services Card # _____

This school has a breakfast, snack and lunch program for all students. Please make us aware of any food allergies your child may have so our nutrition worker can better accommodate your child.

Food Allergies _____

Other Allergies _____

Health Concerns _____

Medications/Treatments _____

If yes, should it be distributed at the school? Please ask for additional form of consent.

Citizenship: Canadian Other _____

1st Language: English French Other _____ 2nd Language: English French Other _____

Country of Birth: Canada Other _____ Country of Origin: Canada Other _____

Ethnic Background – Please check as many as you feel appropriate (Voluntary):

Caucasian Asian Hispanic/Latino African Americans Other _____

Aboriginal (Metis Inuit Non-status Registered Status) Treaty #(if applicable) _____

Student Religion: _____ Parish: _____

Baptized Catholic: Date Baptized Catholic: _____ Place Baptized Catholic: _____

Primary Contact Information:

	Parent/Guardian	Parent/Guardian
Name:		
Relationship:		
Address:		
Occupation:		
Employer:		
Position:		
Home Phone:		
Work Phone:		
Cell Phone:		
Email:		
Religion:		

Check those appropriate:

Parents Together
 Father Remarried
 Father Deceased
 Parents Divorced/Separated
 Mother Remarried
 Mother Deceased

Student lives with: _____ How long? _____ Relationship: _____

Number of brothers and sisters living at home? brothers sisters

Siblings Name	Age	Grade	School

Emergency Contact _____ Home Phone _____ Cell Phone _____

Emergency Address _____ Business Phone _____

Daycare/Sitter _____ Home Phone _____ Cell Phone _____

Daycare/Sitter Address _____

Outside Agency involvement: Name & Phone _____

Family Income Level - Please check the appropriate level.

<input type="checkbox"/> Less than \$10,000	<input type="checkbox"/> \$10,001 - \$30,000	<input type="checkbox"/> \$30,001 - \$50,000	<input type="checkbox"/> More than \$50,000
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Is the student in any of the following programs? Check all that apply.

- Learning Resource Program Alternate Program EAL Support ILP (Ind. Learning Plan)
 Band Program Ukrainian Program Speech Program

Does the student have access to a computer at home? (*Circle one*) **Yes / No**

Does the student have a library card? (*Circle one*) **Yes / No**

List any honors or awards that the student has received:

List all current and recent extracurricular activities (sports, club, music/art & church) that the student participates in:

List any other hobbies or recreational interests of the student:

Parent/Guardian Questionnaire

(Note: Answers to these questions on their own will not in any way disqualify a student from admission. Although the school is not a school for students with profound needs, we work with students who confront and have confronted major life challenges. The more complete information we have, the better the decisions we can make, and the better we can serve the students.)

Does your child suffer from any serious illness, disability, physical or emotional limitations, depressions or other mental illness that might impact their studies or participation in school activities? (*Circle one*) Yes/No If yes, please explain.

Does your child have hyperactivity or ADHD? (*Circle one*) Yes/No If yes, please explain.

Does your child take any medication? (*Circle one*) Yes/No If yes, please ask for an additional form.

Is your child presently enrolled in any type of special education program or counseling at the school he/she attends, or at some other place? (*Circle one*) Yes/No If yes, please explain.

Approximately how many days has your child been absent from school in the past year? _____ Please explain.

Please describe your child's academic strengths and weaknesses:

Has your child skipped or repeated any grades? (*Circle one*) Yes/No If yes, please explain.

Please describe your child's personal strengths and weaknesses.

Why would you like your child to attend the Mother Teresa Middle School? (*Please feel free to attach a sheet to explain any special or extenuating circumstances that make this student particularly needy or deserving*).

Parent/Guardian Observations of Student's Strengths and Weaknesses

Please indicate with an "X" which characteristics best describe your child. If necessary, please describe characteristics more thoroughly below.

_____ shy with others his/her age	_____ shy with adults	_____ energetic
_____ makes friends easily	_____ easy going	_____ emotional
_____ has difficulty keeping friends	_____ prefers passive activities	_____ sensitive
_____ well-coordinated	_____ aggressive	_____ nervous
_____ happy	_____ indifferent	_____ tires easily
_____ temperamental	_____ confident	_____ helpful

Please indicate by placing an "X" under the response that best represents how well your child performs in the following academic and nonacademic areas. Leave any area that does not apply to your child blank. You may add areas of strength and weakness in the comment section.

	Has Difficulty	Is Okay	Does Well
Ability to pay attention in school			
Athletics/Physical Education			
Drawing/Artwork			
Building/Fixing things			
Making friends			
Reading individual words			
Understanding what he/she reads			
Reading speed			
Handwriting (legibility)			
Writing reports			
Creative writing			
Spelling			
Math computation			
Solving Math word problems			
Completes household chores			
Using a computer for school work			
Completing homework			
Knowing what and how to study for a test			
Organization of school work			
Playing a musical instrument or singing			

Please comment on any item you believe warrants a response.

Parent/Guardian Statement of Intent

It is my/our understanding that the Mother Teresa Middle school is an academically challenging school with a compulsory code of attendance, dress and conduct and that full participation of parents or guardians is necessary in order to meet the requirements of the program. I/we agree to cooperate fully with the rules and policies set forth by the Mother Teresa Middle School.

Parent (Guardian) Signature: _____ Date: _____

Parent (Guardian) Signature: _____ Date: _____