



# Application Form

Gordon Campus – Grades K – 6  
3285 Gordon Drive  
Kelowna, BC V1W 3N4

Benvoulin Campus – Grades 7 - 12  
2870 Benvoulin Road  
Kelowna, BC V1W 2E3

Thank you for your interest in Kelowna Christian School. We are excited to educate your child in a Christian environment with dedicated teachers and a standard of excellence that we know you will come to appreciate. The application is long but it is thorough. The information you provide will assist us in properly placing your child and provides a solid document for the school to reference in the future.

## **Admissions Procedures**

All components of the application must be completed and required documents, including the Enrollment Contract and application fee, submitted before the application will be considered. All applications and inquiries for grades K – 12 are processed through the Admissions Office at the Benvoulin Campus.

## **Required Documents:**

- Enrollment Contract with payment
- A valid Canadian birth certificate or Canadian Passport of the child
- Landed immigrant/permanent resident/citizenship if applicable
- A copy of one parent/guardian BC driver's licence, a utility bill copy is required if the address on the driver's licence is not current
- A copy of one parent/guardian BC Medical Services Plan card
- A copy of the most recent report card and year prior including any supporting documents
- Immunization record (for kindergarten students only)

Each application is reviewed and an assessment scheduled. A formal entrance interview will follow between March and May. Grades 7 – 12 students are required to attend the interview.

Assessment is required to determine placement and acceptance.

Siblings are subject to the same application process and review as new applicants and are interviewed at the discretion of the principal.

Families of incoming kindergarten students will receive a letter advising them of the orientation schedule which will take place the first week of June.

Notification of placement will follow the interview. All forms of applicants not accepted are destroyed to protect applicants' information. In the event of wait listing, with the permission of the applicant, information will remain on file and supporting documents and fees must be re-submitted.

## WHO WE ARE

### School Vision, Mission Values and Statement of Faith

We believe that, as Christians, we are called to be a light in the world, demonstrating God's grace, love, and redeeming power through how we live as individuals and how we operate as a school. It is important to us that families understand and respond to our vision, mission and values.

### School Vision and Mission

"IMPACTING THE WORLD FOR CHRIST THROUGH LIFE-CHANGING EDUCATION"

**IMPACTING THE WORLD FOR CHRIST:** This is our vision. It is why we exist as a school and explains why we make the decisions we do.

**LIFE-CHANGING EDUCATION:** This is our mission. It is how we will fulfill our vision as a school.

### School Values

We choose to operate through the following values in order to work towards our ultimate mission and vision. These are the behaviours we desire in our community of staff, students, families and other school participants.

#### CHARACTER

- Exemplified through godliness, integrity and community

#### INNOVATION

- Exemplified through creativity and a pioneering spirit

#### EXCELLENCE

- Exemplified through high standards, strategic intent, clear expectations and effective communication

### Kelowna Christian School Statement of Faith

We seek to provide a quality education from a Biblical perspective. As such, we exist to meet the educational needs of the families who have made decisions to become Christ-followers. We desire to enroll students from Christian families who want to partner with the school in the education of their children. Kelowna Christian School holds to and teaches the following core biblical doctrines: (adapted from the Evangelical Fellowship of Canada)

- The Holy Scriptures, as originally given by God, are divinely inspired, infallible, entirely trustworthy, and constitute the only supreme authority in all matters of faith and conduct.
- There is one God, eternally existent in three persons: Father, Son and Holy Spirit.
- Our Lord Jesus Christ is God manifest in the flesh; we affirm his virgin birth, sinless humanity, divine miracles, vicarious and atoning death, bodily resurrection, ascension, ongoing mediatorial work, and personal return in power and glory.
- The salvation of lost and sinful humanity is possible only through the merits of the shed blood of the Lord Jesus Christ, received by faith apart from works, and is characterized by regeneration by the Holy Spirit.
- The Holy Spirit enables believers to live a holy life, to witness and work for the Lord Jesus Christ.
- The Church, the body of Christ, consists of all true believers.
- Ultimately God will judge the living and the dead, those who are saved unto the resurrection of life, those who are lost unto the resurrection of damnation.



Elementary Campus 3285 Gordon Drive, Kelowna, BC V1W 3N4  
 Middle/High Campus 2870 Benvoulin Road, Kelowna, BC V1W 2E3

## STUDENT APPLICATION FOR ADMISSION

### Personal Data (please print clearly in blue or black ink)

Information collected on this form is collected, used and disclosed by Kelowna Christian School(KCS) in accordance with the Personal Information Privacy Policy for Parents and Students of KCS; a copy of which is available from the school's Privacy Officer.

Student's Legal Name \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 (as it appears on the Birth Certificate) LAST FIRST MIDDLE

Student's USED Name (only if different than above) \_\_\_\_\_

Present Grade \_\_\_\_\_ Grade Applied For \_\_\_\_\_ Date of Admission Requested: \_\_\_\_\_  
 month/day/year

Date of Child's Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Place of Birth \_\_\_\_\_ Gender: M F  
 Month Day Year

Address \_\_\_\_\_ City \_\_\_\_\_ Postal Code \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_

Home Phone \_\_\_\_\_ Parent primary email address \_\_\_\_\_

Are you applying for Club Judah (after-school program)?  Yes  No  Full-Time  Part-Time

### Kindergarten parents – please check desired program:

- Full-Time Program: Monday through Friday
- Part-Time Program: Tuesdays, Thursdays and scheduled Fridays (from September to December, then Monday through Friday from January to June) \*allows for fewer school days during the first term when some children will benefit from a lighter schedule

Parents or Guardians please complete the information below starting with the primary caregiver(s)

Mother's Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Circle one: Birth Adoptive Step Foster Guardian Ministry

Mother's Address \_\_\_\_\_ Postal Code \_\_\_\_\_

Mother's Occupation \_\_\_\_\_ Work Phone \_\_\_\_\_

Mother's Email \_\_\_\_\_ Cell Phone \_\_\_\_\_

Father's Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Circle one: Birth Adoptive Step Foster Guardian Ministry

Father's Address \_\_\_\_\_ Postal Code \_\_\_\_\_

Father's Occupation \_\_\_\_\_ Work Phone \_\_\_\_\_

Father's Email \_\_\_\_\_ Cell Phone \_\_\_\_\_

**ONLY complete this section in the case of separation, divorce or additional guardianship:**

**Mother's Name** \_\_\_\_\_ Home Phone \_\_\_\_\_

Circle one: Birth    Adoptive    Step    Foster    Guardian

Mother's Address \_\_\_\_\_ Postal Code \_\_\_\_\_

Mother's Occupation \_\_\_\_\_ Work Phone \_\_\_\_\_

Mother's Email \_\_\_\_\_ Cell Phone \_\_\_\_\_

**Father's Name** \_\_\_\_\_ Home Phone \_\_\_\_\_

Circle one: Birth    Adoptive    Step    Foster    Guardian

Father's Address \_\_\_\_\_ Postal Code \_\_\_\_\_

Father's Occupation \_\_\_\_\_ Work Phone \_\_\_\_\_

Father's Email \_\_\_\_\_ Cell Phone \_\_\_\_\_

**Marital Status:** Married    Separated    Divorced    Joint Custody    Sole Custody    Social Services

In the case of Separation, Divorce or Legal Guardianship please explain the living arrangements:

\_\_\_\_\_

**Legal Guardianship** of this child is awarded to:

**Name(s)** \_\_\_\_\_ and \_\_\_\_\_

Is there a court order regarding custody? [  ] Yes [  ] No    **If "Yes",** a copy of documents must be included

Does each parent require a report card? [  ] Yes [  ] No    School information? [  ] Yes [  ] No

**Field Trip Permission:**

I give permission for my child to accompany Kelowna Christian School on all field trips during the school year, knowing that I will receive advance notice of trips leaving the campus. I understand trips follow school policies that cover supervision, first aid, and school approved drivers (policies are published on the school website).

**Parent Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Privacy of Personal Information:**

The Personal Information Privacy Policy of Kelowna Christian School is posted on our school website, and describes the policies and practices regarding the collection, use and disclosure of personal information about students and parents, including the steps the school has taken to ensure personal and financial information is handled appropriately and securely. At Kelowna Christian School we disclose personal information when authorized by you, when required by law, or when permitted by law. Specifically, you provide Kelowna Christian School implied consent to publish family names, addresses, and phone numbers in a telephone directory distributed to school families, as well as publish photographs and/or videos of students in school promotional materials including teacher/student blogs and our school website. You understand that it is your responsibility to advise the school in writing if you do not want your child's image used in photography or videos, or family information published in the school directory. *Please direct any questions or concerns to the school privacy officer.*

**Parent Signature** \_\_\_\_\_ **Date** \_\_\_\_\_



# Medical Information Form

**This form must be completed in full, including the parent signature at the bottom, before attending school. Advise the school office of any changes.**

Student Name: \_\_\_\_\_ Care Card #: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_ Doctor's Phone #: \_\_\_\_\_

**In case of emergency, if parents/guardians cannot be reached, list two *local* contacts:**

Name \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_ Relationship \_\_\_\_\_

## 1) Life-Threatening Health Conditions (a Medical Alert Plan will be created)

The following life-threatening health conditions apply to this student:

Anaphylactic or severe allergies (e.g. food, insect stings) – please specify: \_\_\_\_\_

Blood clotting disorders (e.g. haemophilia)

Diabetes

Epilepsy with a history of Grand Mal (tonic-clonic) seizures in the past 2 years

Feeding tube

Heart condition (e.g. heart repair, murmur)

Severe asthma (e.g. resulted in hospitalization in the past 2 years)

Special needs due to renal failure, venous access devices, post-transplant

Other health conditions which may require emergency care – please specify:

## 2) Non-Life-Threatening Health Conditions

Describe any non-life-threatening health conditions which may affect your child's ability to function at school (e.g. vision impairment, hearing impairment, mental health conditions, mild/moderate asthma or allergies, etc.)

## 3) On-Going Medications

List long-term medications your child is taking (e.g. medication for ADHD, self-administered inhalers, etc.):

## 4) Parent Signature

Printed Parent Name: \_\_\_\_\_ Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**School Data:**

How did you hear about the school? \_\_\_\_\_

Did you have a tour? \_\_\_\_\_ Did you attend the kindergarten information session ? \_\_\_\_\_

Please list the names and ages of all other children in your family.

Name	Date of Birth

Name	Date of Birth

Please list the last two schools your child has attended (including preschool if applicable):

School Name \_\_\_\_\_ Dates attended \_\_\_\_\_

Complete Address \_\_\_\_\_

Phone Number \_\_\_\_\_ FAX Number \_\_\_\_\_ email \_\_\_\_\_

School Name \_\_\_\_\_ Dates attended \_\_\_\_\_

Complete Address \_\_\_\_\_

Phone Number \_\_\_\_\_ FAX Number \_\_\_\_\_ email \_\_\_\_\_

**Citizenship Status:** Attach copy of the birth certificate

**Home Language:** Languages spoken in your home? Primary \_\_\_\_\_ Secondary \_\_\_\_\_

If you do not currently live in Kelowna, when do you expect to move to Kelowna?

\_\_\_\_\_

Has your child ever been suspended or expelled from school? [ ] Yes [ ] No  
(If "Yes", please explain.)

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

Has your child ever been involved in unlawful and/or violent behaviour? [ ] Yes [ ] No  
(If "Yes", please explain.)

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

Do you hereby give Kelowna Christian School permission to contact schools or evaluators?  
[ ] Yes [ ] No

**Academic Data**

Please note: any inaccurate or withheld information can nullify acceptance.

**Attach a copy of your child’s most recent Report Card and year prior** (if applicable) and comment on your child’s academic progress.

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**Learning Assistance**

Is your child in need of, or has your child ever received Learning Assistance in school? [ ] Yes [ ] No

**If “Yes”, please explain and include a copy of the most recent IEP (if applicable).**

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**Learning Difficulties**

Has your child ever been assessed for &/or diagnosed with learning or behavioral difficulties?

(e.g. ADD, ADHD, Emotional Distress, Autism, Dyslexia, FAE, FAS, other) [ ] Yes [ ] No

**If “Yes”, you MUST attach the most recent copies of all Assessments, IEP and other related testing.**

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**External Consultants**

Has your child ever been assessed by/or received services from a Speech Language Therapist, Occupational Therapist, Physiotherapist, Psychologist or Audiologist? [ ] Yes [ ] No

**If “Yes”, please explain and attach relevant documentation.**

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**Does your child experience anxiety or any other condition that might affect their integration?**

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**What are your child’s interests?**

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**Is your child involved in any extra-curricular or volunteer activities?**

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<b>PARENT/GUARDIAN COMMITMENT</b> <b>Response to School Vision, Mission, Values and Statement of Faith</b>
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<p><b>As a school, we commit to...</b></p> <p><b>Character</b></p> <ul style="list-style-type: none"> <li>a. Provide a Christ-centred curriculum and program for students, allowing them the opportunity to make a personal decision to follow Jesus with their whole life</li> <li>b. Act in, and encourage a character of godliness, integrity and community</li> <li>c. Provide a safe and nurturing Christian school environment</li> <li>d. Show respect to students and families</li> <li>e. Employ the resources of the school wisely</li> </ul> <p><b>Innovation</b></p> <ul style="list-style-type: none"> <li>f. Provide an environment which stimulates creative thinking and response and the ability to attempt and explore</li> </ul> <p><b>Excellence</b></p> <ul style="list-style-type: none"> <li>g. Uphold high standards of conduct and effort</li> <li>h. Communicate with students and families by first seeking to understand and through the use of respectful, clear and timely communication</li> </ul>	<p><b>In making this application, as parent(s)/guardian(s), I/we commit to...</b></p> <p><b>Character</b></p> <ul style="list-style-type: none"> <li>a. Support my/our child's spiritual development (e.g. through church involvement, biblical teaching, prayer), allowing them full opportunity to make a personal decision to follow Jesus with their whole life</li> <li>b. Encourage a character of godliness, integrity and community</li> <li>c. Support a safe and nurturing school environment through my/our interactions with others</li> <li>d. Show and encourage respect to school administrators, teachers and support staff</li> <li>e. Honour my/our financial commitments to the school</li> </ul> <p><b>Innovation</b></p> <ul style="list-style-type: none"> <li>f. Encourage an attitude of exploration, discovery and new learning, emphasizing the journey of learning and not merely the final results</li> </ul> <p><b>Excellence</b></p> <ul style="list-style-type: none"> <li>g. Encourage high standards of conduct and effort</li> <li>h. Seek information in order to understand school direction and intent, upholding respectful communication</li> </ul>
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Please indicate your support for the following statements by signing below:

- I/We are enrolling our child at Kelowna Christian School because of my/our desire that our child(ren) receive a Christ-centered education based on the Kelowna Christian School's Statement of Faith and expressed through the School Values.
- I/We and my/our child will support and abide by the school's vision, mission, values, and policies.
- Recognizing that we are all sinful creatures in need of grace, I/we will attempt to provide a family lifestyle that is supportive of, and consistent with, a belief in Jesus as Lord and Saviour, as exemplified in the School Values and Statement of Faith.
- I/We understand that my/our child will participate in school activities, including sports and sponsored trips away from the school campus, accepting the published inherent risks that these include.
- I/We agree to support school policies and regulations, and authorize the school staff to employ such discipline as is deemed wise in support of my child. I/we understand that the school reserves the right, after parental conference, to dismiss any child who fails to comply with established regulations and discipline or whose parent(s)/guardian(s) do not assume their responsibility to the school.
- This application is hereby submitted with the full understanding of fees and guidelines as outlined in the Enrollment Contract. I/We attest that the information is true and complete. I/We acknowledge that any falsification of information may result in the nullification of acceptance.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date



## **STUDENT COMMITMENT**

### **Response to School Values**

We believe that, as Christians, students are called to be a light in the world and in their school, showing God's grace, love, and redeeming power through how they live as members of our school community. It is important to us that students understand and respond appropriately to our vision, mission and values.

### **Student Letter (for applications for grades 7 – 12)**

Students in Grades 7 – 12 are required to read and sign the Student Commitment section. The student must attach a hand-written and signed letter indicating why they want to attend Kelowna Christian School. In your letter, it is important to discuss the following:

1. Your personal relationship with God
2. Your current involvement with a church and/or youth group
3. The reasons why you would like to attend Kelowna Christian School

Attach the student letter to this application.

### **Student Commitment (for applications for grades 7 – 12)**

As a student of Kelowna Christian School, I willingly pledge...

1. **To uphold the school's behavioural standards**, as detailed in the Student Handbook, regarding academic honesty, language, respect for property, bullying, dress code, appropriate use of the internet and the school's technology resources, and the non-use of tobacco, alcohol and drugs. I realize that I am a representative of the school and – most importantly – the name of Christ both within the school community and the greater community. As such, I will act in a respectful manner to authority, others, and myself.
2. **To maintain Christian standards of respect in my relationships with others** through courtesy, kindness, morality and honesty. I will strive to live out the school's values of character, innovation and excellence. While it is important to grow, investigate and question along my spiritual journey, I will show respect to God Himself, the faith journey of others and the spiritual nature of the school.

**I understand that it is my responsibility to abide by these standards and that failure to comply will necessitate disciplinary action. I have read the current Student Handbook located on the webpage.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

## Spiritual Commitment and Support

We believe that the best environment in which to develop a child's spiritual well-being is one in which the family, school and church provide consistent and positive spiritual input, with the home environment as the fundamental place of spiritual modeling and learning. Please answer each of the following questions fully; feel free to attach additions if more space is needed.

1. Why do you want your child to attend Kelowna Christian School?

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2. How have you, as parent(s) or guardian(s), attempted to build Biblical values into your child's upbringing?

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3. Do you regularly attend church?

- If yes, please name the church and describe your level of church involvement.
- If no, please explain.

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4. Comment on your desire for your child to make a personal decision to follow Jesus, using their whole life in service to Him.

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5. What is your child's attitude toward spiritual matters? How has he/she responded to spiritual teaching?

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6. What questions or comments do you have regarding how your child will be taught in a biblically-based environment?

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FAMILY NAME \_\_\_\_\_ (please print)

FIRST NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_



## LEGAL RESIDENCY OF PARENT – FORM A

(if parents are deceased, use Form B)

To be completed and signed by a parent or legal (court-appointed) guardian.  
If legal guardian, attach a copy of court order appointing you as legal guardian.

*(Lawfully admitted into Canada)*

1. I am (please X one):

- A Canadian citizen (attach proof of residency: a BC driver's license AND BC Care Card)
- A landed immigrant (attach photocopy of landed immigrant status paper)
- Lawfully admitted to Canada under one of the following documents (please mark the appropriate box below and attach photocopy of document):
  - Admission as a refugee claimant
  - A person claiming refugee status who has a letter of no objection
  - Student authorization (student visa) for two or more years (or issued for one year but anticipated to be renewed for one or more additional years)
- Employment authorization (working permit) for two or more years (or issued for one year but anticipated to be renewed for one or more additional years)
- A person carrying out official duties as a diplomatic or consular official (with a foreign representative acceptance counter foil in his/her passport)
- Other – document description: **(must be cleared with Immigration Canada)** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Residency in British Columbia

*(for families moving to British Columbia to take up permanent residency, please complete with your new address and check yes. Please note: driver's licence and medical card must be provided within 3 months of relocation.)*

I am a resident of British Columbia (please X one):

- Yes                      Residency address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- No                         I am not a resident of British Columbia

### Confirming signature:

Parent's/legal guardian's printed name: \_\_\_\_\_

Parent's/legal guardian's signature: \_\_\_\_\_

Date: \_\_\_\_\_



# KINDERGARTEN STUDENTS ONLY: IMMUNIZATION HISTORY

This information is important for updating immunization records and is being collected under the authority of the Health Act. It will be used for updating immunization records and requesting records. The information collected on this form is protected under the freedom of information and privacy act. Please direct questions about the collection and use of this information to the:

Kelowna Health Unit, 1340 Ellis Street, Kelowna, B.C. V1Y 9N1

B.C. Care Card # \_\_\_\_\_

Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Parents/Legal Guardians: \_\_\_\_\_

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

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

Street

City/Town

Postal Code

Name of School: \_\_\_\_\_

Kindergarten A.M.  P.M.   
All Day

Has your child been immunized? YES  NO

### IF YES,

- Please attach a photocopy of your child's immunization record.
- Are your child's records at the local health unit? YES  NO
- If records not at local health unit, complete form below.

### CONSENT FOR RELEASE OF IMMUNIZATION RECORDS:

Child's Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_

Siblings: Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_

Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_

Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_

I hereby consent to release of Immunization Records to: **Kelowna Health Unit, 1340 Ellis Street, Kelowna, B.C. V1Y 9N1**

\_\_\_\_\_  
Signature of Parent or Legal Guardian

Date: \_\_\_\_\_

Address

Immunization Records are available from:

\_\_\_\_\_  
Name of Health Unit or Doctor

\_\_\_\_\_  
Address of Health unit or Doctor