



Smithville Christian High School

STUDENT ADMISSION APPLICATION & REGISTRATION FORM 2026/27

SECTION A - FAMILY INFORMATION			
1. NAME OF MOTHER or LEGAL GUARDIAN		RELATIONSHIP TO STUDENTS	LIVES WITH STUDENTS <input type="checkbox"/> Yes <input type="checkbox"/> No
ADDRESS		EMAIL ADDRESS	
ALL RELEVANT PHONE NUMBERS:			
HOME	CELL	WORK	
Is this the primary contact person? <input type="checkbox"/> Yes <input type="checkbox"/> No			
OCCUPATION		PLACE OF EMPLOYMENT	
2. NAME OF FATHER or LEGAL GUARDIAN		RELATIONSHIP TO STUDENTS	LIVES WITH STUDENTS <input type="checkbox"/> Yes <input type="checkbox"/> No
ADDRESS <i>(if different)</i>		EMAIL ADDRESS	
ALL RELEVANT PHONE NUMBERS:			
HOME	CELL	WORK	
Is this the primary contact person? <input type="checkbox"/> Yes <input type="checkbox"/> No			
OCCUPATION		PLACE OF EMPLOYMENT	
CUSTODY INFORMATION Is there a custody situation that Smithville Christian High School should be aware of (permission to visit, pick up, or see your child)? <i>If yes, a form will be provided for you to complete.</i>			<input type="checkbox"/> Yes <input type="checkbox"/> No
CHURCH AFFILIATION Name, address and denomination of church currently attending:			
PLEASE LIST ALL THE SIBLINGS (INCLUDING THEIR DATES OF BIRTH) WHO LIVE IN THE HOME			
Name(s)	Date of Birth		
	MM	DD	YYYY
	MM	DD	YYYY
	MM	DD	YYYY
	MM	DD	YYYY
	MM	DD	YYYY



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SECTION B - STUDENT INFORMATION					
1. FULL LEGAL NAME OF STUDENT TO BE REGISTERED					
FIRST		MIDDLE		LAST	
PREFERRED NAME (if different from above)		GENDER <input type="checkbox"/> M <input type="checkbox"/> F	DATE OF BIRTH		GRADE REGISTERING FOR
			MM	DD	YYYY
STUDENT STATUS <i>(please provide photocopy of proof of status as well as copy of birth certificate or similar to confirm age)</i> <input type="checkbox"/> Canadian Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Visa <input type="checkbox"/> Refugee <input type="checkbox"/> International <input type="checkbox"/> Other (please specify) _____				IF BORN OUTSIDE OF CANADA, DATE OF ENTRY INTO CANADA	
PREVIOUS SCHOOL DETAILS <i>(Name, Full Address, Telephone Number)</i>					
ELECTRONIC IMAGES: I/we agree that electronic images such as (but not limited to) photographs and videos of the student and/or me/us may be used for promotional and other purposes as needed unless School administrative (not teaching) staff receives written notice from me/us to the contrary.					<input type="checkbox"/> Yes <input type="checkbox"/> No
Has the student passed the Ontario Literacy Test (Grade 10)? (if transferring from a High School)					<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
How many hours of Community Service has student completed? (if transferring from a High School)					
MEDICAL INFORMATION					
Does the student have:		Asthma		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		Epilepsy		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		Diabetes		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Does the student have a condition that can lead to anaphylactic shock? If yes, please provide the type of condition and medical documentation.				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Does the student carry an Epi-pen? <i>If the student has an anaphylactic allergy, you must complete the School's Administration of Medication Form and provide any medication, specifically an EpiPen, for the first day the student attends our school.</i>				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Does the student have any other life-threatening medical conditions?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes to any of these, please provide details and documentation if applicable:					
Does the student have non-life-threatening health conditions or allergies that the school should be aware of? (if yes, please provide details.)				<input type="checkbox"/> Yes <input type="checkbox"/> No	
OUR GOAL IS TO MEET THE LEARNING NEEDS OF ALL OUR STUDENTS. TO HELP ENSURE THAT WE CAN MEET THE LEARNING NEEDS OF YOUR CHILD, PLEASE SHARE THE FOLLOWING INFORMATION:					
Have you attached the latest report card for this student?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Does this student have an Individual Education Plan, Safety Plan, Behaviour Plan or similar document(s)? <i>(if so, please attach)</i>				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Does this student have any identified disabilities that Smithville Christian High School should be made aware of?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Does this student have academic, behavioural, physical, medical, psychological, social or emotional concerns the school needs to be made aware of?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Has the student been suspended or expelled in the last 18 months?				<input type="checkbox"/> Yes <input type="checkbox"/> No	



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SECTION C - ALTERNATE AND EMERGENCY CONTACTS

Please provide, in order of priority, who should be called in the event of an emergency along with a phone number where they can best be reached

NAME	RELATIONSHIP	PHONES (specify cell/home/work)	CAN PICK UP STUDENT
1.			<input type="checkbox"/> Yes <input type="checkbox"/> No
2.			<input type="checkbox"/> Yes <input type="checkbox"/> No
3.			<input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION D - ENROLLMENT CHECKLIST

Do you agree to the transfer of the Ontario Student Record file(s) from their current school to this school upon enrollment?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does our Regional Public Health Office have all updated immunization records for the student(s)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you attached proof of birthdate for the student(s)? (birth certificate, passport, or baptismal certificate)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you require bus transportation? If yes, you will be asked to complete the Bus Registration Form we send out in the spring.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I have read and agree with the Parent, School and Student Partnership Agreement on page 4.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you attached the latest report card for the student(s) applying for enrolment at Smithville Christian High school ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you attached a copy of existing IEP's, Safety Plans, Behaviour Plans or similar documents for from their previous school?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you completed Section B (student information form) for each student you wish to enrol?	<input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION E - PERMISSION ACKNOWLEDGEMENTS AND RELEASE OF INFORMATION

I/We verify that the information provided on this form is true and correct. I/We understand that it is my/our responsibility to inform the school immediately of any changes to the information contained on this form. I also acknowledge that providing false or misleading information may impact admission and continued enrolment at the school.

1. NAME OF PARENT/LEGAL GUARDIAN (please print)

2. NAME OF PARENT/LEGAL GUARDIAN (please print)

SIGNATURE

SIGNATURE

DATE: MM DD YYYY

DATE: MM DD YYYY

Notice of Collection and Use of Personal Information

Information on this form is collected under the legal authority of the Education Act and in accordance with the Municipal Freedom of Information and Protection of Privacy Act [MFIPPA]. It will be used to establish the Ontario Student Record [OSR], and for student and education related purposes such as registration, administration, communication, data reporting, and contacting student's previous school. Student information such as name, date of birth, and contact information is released to the Regional Health Units in accordance with the Health Protection and Promotions Act and the Immunization of School Pupils Act. [Name of School] does not discriminate on the basis of race, ancestry, colour, national or ethnic origin, citizenship, and gender. Questions or concerns should be directed to the principal.



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THIS SECTION TO BE COMPLETED AT THE PRINCIPAL INTERVIEW

PARENT, SCHOOL AND STUDENT PARTNERSHIP AGREEMENT

Please review the details below in order to have a clear understanding of what is expected of Smithville Christian High School, its families and students. This information will also be reviewed at the admissions interview.

Rationale

Smithville Christian High School is governed by the Board, which is a community of members committed to these ideas:

1. That the Bible is the infallible Word of God and is relevant in all areas of living.
2. That Jesus Christ is the Risen Son of God and is Lord over the whole universe, which includes all areas of human knowledge.
3. That the education of children is primarily the responsibility of parents but that Christian parents can be supported in their educational responsibilities by the Church and Christian school. Therefore, it is important that Christian Parents, the Christian School, and the Church work together for the education of our children.
4. That the beginning of Wisdom is the fear of the Lord.

Therefore:

The mission of Smithville Christian High School is to train students to live as responsible disciples of Jesus Christ.

We seek to create a school community where our students are encouraged to focus their lives, conduct, and school work around our Core Values of: **Belong, Believe, and Succeed.**

STUDENT COMMITMENT

As a Christian learning community, we believe that integrity, personal responsibility, and mutual respect are essential for a healthy school community. In alignment with our School's values, every student is expected to follow the Student Commitment in their desire to contribute positively to our school culture. Failure to honour this commitment repeatedly may lead to a review of a student's enrollment.

Students will agree and abide by the following:

"As a student at Smithville Christian High School, I promise to conduct myself with Biblical integrity by being honest, taking responsibility for my actions, and using my time and gifts to help others in our school community. I will respect and follow the expectations and rules in this handbook, and I will encourage my classmates to do the same."

PARENT COMMITMENT

As a parent of a student at Smithville Christian High School:

- I understand that the education my child receives at Smithville Christian will be integrated with Biblical teachings as per both the Educational Creed (Appendix #13) and Marriage, Sexuality and Gender (Appendix #32).
- I understand that the education my child receives at Smithville Christian will be delivered by Christian teachers.
- I understand that the education my child receives at Smithville Christian will be delivered in the context of an interdenominational Christian community and will include activities such as regular chapels, devotions and prayers.
- I commit to support the policies (uniform, cell phone, technology agreement, discipline, etc.) and religious activities of Smithville Christian with my student.
- I commit to support the work of the teachers and administration of Smithville Christian and if I have concerns, address them.

Student signature:

Parent Signature: