



Urban Academy Enrolment Application

STUDENT INFORMATION

Date of Application: _____ Applying to _____ Grade in September 200 _____

Full Name: _____
First Middle Last

Nickname, if preferred: _____ Sex: M / F _____

Date of Birth: _____

Place of Birth: _____
City County State

EDUCATION

Present school: _____ Date entered: _____

School Address: _____ Phone # _____

Name of Head of School: _____

List Other Schools Attended:

School Name/Location: _____ Dates attended: _____

School Name/Location: _____ Dates attended: _____

Will Tuition Assistance/Bursary be requested? Yes No

ADDITIONAL INFORMATION

In order for us to get to know your child better, we ask that you respond to the following questions as candidly and completely as you can. We appreciate your time and care in completing this section.

1. What adjectives or phrases come to mind in describing your child?

2. For applicants to grades Junior Kindergarten through 5th, please indicate the after-school activities your child most enjoys.

3. What do you consider your child's academic and personal strengths?



Urban Academy Enrolment Application

Page 2 of 3 Continued...

4. Has additional testing or tutoring been indicated for your child at any point in school? Yes No
If so, at what grade level and in what areas?

5. Please note any academic and or social concerns for your child that we should be aware of.

6. Please explain any special medical attention that your child has received or is receiving from a medical professional.

7. Has your child been referred for psychological or educational assessment? Yes No
If yes, please describe.

8. Describe your hopes for your child as a student at Urban Academy.

9. Where did you learn about Urban Academy?

10. What skills, talents, or contacts do parents have which may be of benefit in the educational process of the school?

Along with pages 1 through 3 of the Admission Application, please enclose:

- The appropriate application and/or registration fee payable to Urban Academy (See Tuition Schedule)

Send applications by mail or drop off to:

Urban Academy
101 3rd Street
New Westminster, BC
Tel: 604-524-2211



Urban Academy Enrolment Application

PARENT AND FAMILY INFORMATION

Page 3 of 3 Continued...

Mr. _____
First Middle Last

Address: _____
Street City State Zip Code

Ms./Mrs. _____
First Middle Last

Address: _____
Street City State Zip Code

Student resides with: Both Parents Father Mother Guardian

To whom should Urban Academy correspondence be sent?

Both Parents Father Mother Guardian

Father or Male Guardian Information

Mr. _____
First Middle Last

Address: _____
Street City State Zip Code

Home phone: _____ Home fax: _____ Home e-mail: _____

Employer: _____ Occupation/Profession: _____

Bus.phone: _____ Bus.fax: _____ Cell phone: _____ Bus.e-mail: _____

Mother or Female Guardian Information

Ms./Mrs. _____
First Middle Last

Address: _____
Street City State Zip Code

Home phone: _____ Home fax: _____ Home e-mail: _____

Employer: _____ Occupation/Profession: _____

Bus.phone: _____ Bus.fax: _____ Cell phone: _____ Bus.e-mail: _____

Are the rights of either parent restricted by court order? Yes No *(Documentation may be required)*

Who is financially obligated for tuition and fees? _____

Sibling Information

Full Name: _____ Age: _____ Current School: _____

Full Name: _____ Age: _____ Current School: _____

Full Name: _____ Age: _____ Current School: _____

Learned of The Academy through: Parent of a student, alumna, newspaper, website, other: _____

Signature of Parent / Guardian _____ Date: _____

Urban Academy does not discriminate on the basis of race, color, religion, gender, national or ethnic origin in the administration of educational or admissions policies, financial aid programs, and athletic and other school-administered programs, or its employment practices.