

Application For Admission: Secondary Program

Please complete both Part A: General Information and Part B: Supplementary Documentation and return the entire application package with the Application Fee to the Brighton School Admissions department. Please make cheques payable to Brighton School.

PART A: General Information

Application Date:	Applying for: <input type="checkbox"/> September 20_____ <input type="checkbox"/> Current year in progress
Applying for which program?* <input type="checkbox"/> Credit <input type="checkbox"/> Pre-Credit <input type="checkbox"/> Alternative Non-Credit Program	

**Note: For the Credit Program, students generally should be at least a grade 6 level in academics, and will work towards the Ontario Secondary School Certificate (OSSC:14 credits). The Pre Credit Program is a modified academic remedial program to prepare students for possible entry into a credit program. The Alternative program is for students who are working at an early elementary level, and wish to focus on fundamental language, literacy & numeracy to prepare for future employment and independent living. Please note that there is always an opportunity to change pathways and combine programs.*

Student Information			
Name:		Gender: <input type="checkbox"/> male <input type="checkbox"/> female	
Age:	Date of Birth (dd/mm/yyyy):		
Citizenship:	Place of Birth: City:	Country:	
Home Address:			

Family Information			
Mother's Name:			
Mother's Address: <input type="checkbox"/> same as son/daughter, or:			
Mother's Occupation:		Place of Work:	
Home Phone:	Business Phone:	Cell Phone:	
Mother's Email:			
Father's Name:			
Father's Address: <input type="checkbox"/> same as son/daughter, or:			
Father's Occupation:		Place of Work:	
Home Phone:	Business Phone:	Cell Phone:	
Father's Email:			
Parents are: <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Single <input type="checkbox"/> Mother Deceased <input type="checkbox"/> Father Deceased			
Student lives with: <input type="checkbox"/> Both parents, same household <input type="checkbox"/> Both parents, different households <input type="checkbox"/> Mother only <input type="checkbox"/> Father only			
Check if Applicable: <input type="checkbox"/> Joint custody <input type="checkbox"/> Sole custody mother <input type="checkbox"/> Sole custody father			
Preferred or family email address for correspondence:			

Learning Profile
Diagnosis?
Please describe your son/daughter's main learning issues/areas of difficulty:
Please describe your son/daughter's strengths, abilities and talents:
What are your academic goals for your son or daughter? (i.e.: improvement in literacy, numeracy, self-management, social skills...)
What are your long-term goals for your son or daughter? (i.e.: High School certificate or diploma; community college, employment; Adult program...)
Has your son/daughter displayed behaviour problems in school or at home? Please describe.

Please Comment On Your Son/Daughter's Abilities Or Needs In Each Of These Areas:

<i>Communication Skills</i>	<i>Organizational Skills</i>
<i>Attention Span</i>	<i>Class Participation</i>
<i>Independent Work Skills</i>	<i>Teamwork</i>
<i>Homework Completion</i>	<i>Motivation to Learn</i>
<i>Social Skills</i>	<i>Relations with Peers / Friends</i>
<i>Relations with Adults / Teachers</i>	<i>Conduct</i>

Please list the approximate grade level that your son/daughter has successfully completed, or his/her current working level for each skill area:

Subject	Grade level	Comments
Reading – Decoding		
Reading - Comprehension		
Writing/Output skills		
Math		

School History		
Current School:		
Current School Address:		
Principal's Name:	School Phone Number:	
Please List Previous Schools Attended:	Years attended	Grades

Health Profile
Does your child have any physical challenges that would require an assistant to support them in school activities? Please describe:
Does your child have any behavioural issues that would require an assistant to support them in school activities? Please describe:

PART B: Supplementary Documentation

To help us determine if there is a fit between your child's learning needs and our program, please provide the following supplementary documentation with your application (if available):

1. Most recent Report Card and/or Progress Report
2. Most recent IEP (Individual Education Plan)
3. Most recent evaluations, assessments or reports from psychologists/psychiatrists, speech and language pathologists, occupational therapists, educational consultants, etc.
4. Recent samples of your child's work that represent his or her abilities in math, reading, writing or other subjects.

Admission Process

Thank you for your application to Brighton School. All information will be kept confidential. Once we receive your complete Application Form together with your Application Fee, we will set up a student assessment visit (usually 1 hour) and a class visit (usually a half day). We will inform parents of the acceptance decision as soon as possible.

Application Fees	Mailing Address & Contact Info	Scanning Info
Within Canada: \$150 Outside of Canada: \$450 Cheque may be mailed, or payment submitted electronically to lear@brightonschool.ca	Brighton School 240 The Donway West Toronto, M3B 2V8 Attention: Irene McRae, Principal 416-932-8273 ext. 120	Scan & email Application to: imcrae@brightonschool.ca

Student Questionnaire

Student Name:	Date:
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Which school subjects do (did) you enjoy the most? Explain
Which subjects do (did) you find the most difficult?
What helps you to be successful at school?
What do you do for fun, in your free time?
What extracurricular activities, teams etc. are you involved in? Please explain
What are your goals for the future? Do you have a career path, or an area of interest in mind?

<i>Print Student Name</i>	<i>Student Signature</i>	<i>Date</i>