



Application for Admission

Program Information

Preferred start term: Year: _____ Winter (Jan - Apr) Spring (May – Jun)
 Summer (July – Aug) Fall (Sept - Dec)

Enroll for: Grade 8 Grade 9 Grade 10 Grade 11 Grade 12

Student Information

Title: Mr. Ms. Mrs. Dr. Legal Surname/Family Name: _____

First name: _____ Middle/Other Names: _____

Preferred First Name: _____ Former Surname/Family Name: _____

Mailing Address: _____

City: _____ Province/State: _____

Country: _____ Postal Code: _____

*All correspondence will be sent to this address. You must notify Admissions of any address change.

Phone: (country code)(area code) _____ Alternate Phone: (country code)(area code) _____

Cell/Mobile: (country code)(area code) _____ Student's Personal Email: _____

Permanent Address (if different from above): _____

City: _____ Province/State: _____

Postal Code: _____ Country: _____

Emergency Contact Person

Surname/Family Name: _____ First: _____

Relationship to Student: _____

Phone: (country code)(area code) _____ Cell/Mobile: (country code)(area code) _____

Email address: _____



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Biographical Information

Date of Birth (YYYY/MM/DD): _____ Gender: Male Female Other

Citizenship: Canadian Other (specify): _____

If "other" Canadian Residency or Visa Status:

Permanent Resident Refugee Student Visa/Study Permit Other (specify): _____

Country of Origin: _____

First language: English Other (specify): _____

(Voluntary Disclosure) Disability/Medical Condition?: No Yes

(Voluntary Disclosure) Do you identify yourself as a Canadian Aboriginal person?

No Yes If yes, are you: First Nations Metis Inuit

Previous Education

BC PEN (Personal Education Number) leave blank if you do not have one: _____

Secondary School Information:

List all the schools of secondary institutions you are currently or have previously attended.

Students must submit transcripts confirming attendance at each institution whether or not a credential was completed at the institution. Students must also submit documents confirming graduation from any institutions. If transcripts are written in a language other than English, an official English translation must also be submitted. Submitted documents become the property of Johnathan Academy and will not be returned.

Previous Secondary and Post-Secondary Institutions	Province/Country	Dates Attended		Last Grade/Level Completed	Credential Awarded or date of expected graduation
		From	To		

Have you ever been required to withdraw for academic reasons or been expelled from another institution?

No Yes (specify reason): _____

Do you have an Inclusive Education Designation?

Category: A- Physical Impairment, B- Deaf /Blind, C- Moderate to Profound Intellectual Disability, D- Chronic Health, E- Visual Impairment, F- Hearing Impairment, G- Autism Spectrum Disorder, H- Serious Mental Illness

No

Yes (specify): A B C D E F G H Other: _____



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Standardized Admission Testing

If English is not your first language or if you are an international student, please indicate the following:

Number of years in English language studies: _____

English Language Proficiency test taken: IELTS TOEFL PTE None Other: _____

Score achieved: _____ Date test taken (YYYY/MM/DD): _____

Medical Insurance

i: Please note that international students are required by law to apply for British Columbia Medical Service Plan insurance (MSP).

Students are responsible for applying directly to MSP for medical insurance. Students are required to have private medical insurance for the first three months (if not a Canadian Resident) and must provide proof of the insurance.

Please provide a copy of insurance policy or CareCard with this form if you already have one.

Guardianship and Homestay

International students under the age of 19, not traveling with their parents, are required to have a legal guardian in during their stay in Canada.

I will require Guardianship services from the school.

I have my own guardian.

I will require Homestay services from the school.

I have my own homestay.

Declaration: I hereby declare that:

- The information I have submitted in this application for admission is true, correct, and complete to the best of my knowledge
- I understand that submission of any false statements or documents will result in the immediate cancellation of my admission and registration
- I understand that completion of this signed application permits Johnathan Academy to request and/or confirm any information necessary to support my application for admission
- I understand and acknowledge that it is my responsibility to be aware of, and comply with, all Johnathan Academy policies and procedures.

Privacy & Data Protection

The School will review the information provided in this form to determine your eligibility for enrollment with the School, to manage your application and the admission process and, if you are selected and elect to attend, to manage enrollment and attendance at the School, including but not limited to registration, maintenance of your student record, and the provision of services to students. The personal and educational information you provide on this form may be shared with departments of the provincial and federal governments as required by legislation and regulation. Additionally, your application will be received and reviewed by the School's parent company, Global School Systems based in the United Kingdom and the Netherlands and your personal and contact information may be provided to third parties based in the United States or other jurisdictions for the provision of services to students (eg. library databases).

Accordingly, please be aware that your personal and educational information will be accessed and stored outside of Canada. The School collects, uses, and discloses your personal information as permitted or required by applicable privacy legislation. If you have any questions, please consult our Privacy Policy <https://ucanwest.ca/media/105004/6751-informationprivacysecurity.pdf> or contact our Privacy Officer at 604.915.9607. By submitting your application and agreeing to the Terms and Conditions, you expressly consent to the collection, use, and disclosure of your personal and educational information as described herein and are hereby notified that your personal information may be accessed and stored outside of Canada.

Student's Signature

Johnathan Academy
Suite 400-5750 Oak Street, Vancouver BC V6M 2V9
E: info@johnathana.ca W: www.johnathana.ca

Date Signed



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TERMS AND CONDITIONS

Before completing this form, please ensure that you have read the full Johnathan Academy Terms and Conditions.

1) Personal information Privacy Policy

- a) I consent to having Johnathan Academy collect personal information that may include student identification information, birth certificate, legal guardianship, court orders if applicable, parents' contact numbers and e-mail address.
- b) I consent to disclose of academic and health information, most recent report card, emergency contact name and number, doctor's name and number, health insurance number and any similar information needed for registration. I further consent to the use and disclosure of information contained in this form and otherwise collected by or on behalf of Johnathan Academy, (1) for the purpose of establishing, maintaining and terminating the student's or parent's relationship with Johnathan Academy, (2) for additional purposes identified when or before personal information is collected, and (3) as otherwise provided in Johnathan Academy's Personal Information Privacy Policy, a copy of which is available on request. I also consent to the collection, use and disclosure of such personal information by and to agents, contractors and service providers of Johnathan Academy. This information is required in order to register your child at this school and assist the school authority in making an informed decision as to your child's suitability and appropriate placement in the school. It will also allow the school to respond immediately to an emergency. For more information, please contact the privacy officer for Johnathan Academy at info@johnathana.ca.
- c) I consent to having photographs and work samples of my child used by Johnathan Academy in the yearbook, newsletter and other promotional material.

2) Tuition Refunds

Written notification is required for all cancellations and withdrawals. Refunds will be based on the date of receipt of the official written notification. Refunds may take up to 30 business days to process.

a) Domestic Students

Prospective domestic students who decide not to start their program or withdraw from course(s) up to the DROP/ADD deadline of the term receive a 100% refund of all monies paid, excluding:

- non-refundable application fees;
- non-refundable program or registration fees;
- withdrawal processing fee; and
- any other non-refundable fees as identified in the Johnathan Academy Calendar

b) International Students

Prospective international students who have been issued a Letter of Admission (LOA) or a Conditional Letter of Admission (CLOA) and who decide not to start their program or who withdraw from their registered course(s) on or before the drop/add deadline for the term will receive a refund **ONLY** if their student visa or study permit is denied by Immigration, Refugees, and Citizenship Canada (IRCC). Any refund of a required initial deposit (first term's tuition and compulsory fees), will exclude:

- non-refundable application fees;
- non-refundable program or registration fees;
- withdrawal processing fee;
- wire transfer fee; and
- any other non-refundable fees as identified in the JOHNATHAN ACADEMY Calendar.



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Prospective International students will **NOT** be eligible for a refund and the initial deposit fee (first term's tuition and compulsory fees) will be forfeited and retained by Johnathan Academy if:

- their student visa is denied by IRCC due to misrepresentation (directly or indirectly misrepresenting or withholding material facts) or by providing false or misleading information or documentation.
- the student or his/her representative misrepresents (directly or indirectly misrepresenting or withholding material facts) or provides false or misleading information or documentation to the Johnathan Academy.

3) Wire Transfers

Any refunds to International students which are provided via wire transfer will have a \$50 processing fee deducted from the refund total.

4) Student Safety

- a) We, the Parent/Guardian and the student, agree to assume responsibility for any accidental injury resulting from risks associated with school sports activities and field trips. All such activities are properly supervised and are conducted in a safe manner.
- b) We understand that Johnathan Academy is not responsible for any loss or injury suffered by the applicant during periods of independent travel from the Program.

5) The following information identifies specific behavior for both in and out of School.

- a) A student may be dismissed from Johnathan Academy for the following behaviors
 - i. Causing or attempting to cause damage to school or private property or stealing or attempting to steal school or private property.
 - ii. Intimidating or causing physical harm to others or fighting.
 - iii. Interfering with a teacher conducting class.
 - iv. Intentionally defying the valid authority of teachers or administrators or homestay parents.
 - v. Truancy. Any absence must be explained by a note from the parent/guardian or doctor.
 - vi. Possessing or using threatening weapons.
 - vii. Possessing or selling illegal drugs, and/or alcoholic beverages or attending school sponsored activities under the influence of such substances.
- b) Other Expectations
 - i. Students must maintain a minimum of a "B" average, 70 to 75% or a G.P.A. of 2.8 or better.
 - ii. Students may only make long distance calls with the homestay parents' approval. Any phone bills must be paid immediately upon receipt. Any damages caused by the student, must be paid by the student.
 - iii. Students are not permitted to change homestay unless discussed with the Homestay Coordinator. The Homestay Coordinator may refuse such requests if it is not in the interest of the student involved. In cases where permission is granted, students must give host families one month's notice or one month's fees in lieu of notice.
 - iv. Students are not permitted to be away from their homestay unless the host parents are informed.

6) Published Programs

Johnathan Academy reserves the right to alter published programs, course dates, timetables, faculty, course specifications, the content of lectures and/or study materials and locations. The availability of all programs is subject to student demand.

7) Exclusion

To the extent permitted by law, we, other members of our group of companies and associated parties exclude all conditions, warranties and other terms which might otherwise be implied by statute, common law or the law of equity.

By submitting this application form, the student agrees to all the terms and conditions set out by JOHNATHAN ACADEMY.

I accept. By ticking this box I agree to all of the above statements and give my consent to the above terms.

Student's Signature

Johnathan Academy
Suite 400-5750 Oak Street, Vancouver BC V6M 2V9
E: info@johnathana.ca W: www.johnathana.ca

Date Signed



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Consent to Authorize a Third Party (eg. Education consultant/agent, Johnathan Academy academic pathway partner, etc.)

If you are working with an education agent who is assisting you with the application process or if you have a relative or friend who will be the primary contact for the application process, you must provide written consent for Johnathan Academy to communicate and share information with that person (third party). If you do not provide written consent we may not communicate with that person or group.

Please complete the form below if you wish to have an education agent or other person work with Johnathan Academy on your behalf.

I am not using a third party and want all correspondence and communication to come directly to me.

REPRESENTATIVE INFORMATION

I have chosen the person/company stated below to receive all my correspondence and act as my representative.

Relative Agent

Other (please specify): _____

Full Name _____ Company or Relationship _____

Address _____

Telephone (country code)(area code) _____ Fax (country code)(area code) _____

Email Address (This will be the primary email for all Admissions communications) _____

I authorize the person/company stated above to access all of my educational information:

Until the first day of classes only

From now until _____

YYYY/MM/DD

For 12 months following the signed date on this form only

Conditions

1. I understand that the Authorized Representative is permitted to represent me up to and including the end date I have selected.
2. I understand that if I wish to extend the authorization period I have selected above, it is my responsibility to submit a new consent for authorized representative form.
3. I understand that any request to cancel this authorization before the end date I have selected above must be submitted in writing.
4. I understand that submission of this form overrides any Consent to Authorize a Third Party Representative form I may have submitted previously.
5. I understand that it is my responsibility to provide local/Vancouver contact information as soon as I arrive in Canada.
6. I have read and understood the above statements.

Student's Signature

Date Signed



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Application Checklist (Please send all requested documents to AdmissionsJA@cseec.ca)

All documents submitted to Johnathan Academy become the property of the school and will not be returned.

- 1. Completed Application form
- 2. Copy of Passport Biographical - page and Passport Photo
- 3. Official Transcripts - Sent directly from your academic institution to Johnathan Academy in a sealed envelope and confirming the awarding of any completed credentials (eg. Senior school graduation.)
- 4. Proof of English Proficiency (IELTS - 6.0 or better with a minimum of 5.5 in the writing band and no band less than 5.0 or equivalent documentation of English proficiency)
- 5. Certified translations of official documents that are not in English (if applicable)
- 6. Domestic students who are not Canadian Citizens must provide proof of Permanent Residency or Refugee status.

Payment Information

Payment should be made in the form of a bank transfer in Canadian dollars to our bank account as below. Please include the student ID when remitting fees.

Account Name: Johnathan Academy Inc.

Bank Code: 001

Account Number: 07820-001-1941-686

Transit Code (Branch Number): 07820

Bank Name: BMO Bank of Montreal

Swift Code: BOFMCAM2

Bank Address: 100-6088 No. 3 Road, Richmond, BC Canada V6Y 2B3

CC Code: CC000107820

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