

Late French Immersion Student Registration

For current NVSD students. (Students new to the North Vancouver School District must also complete a Student Registration Form.)

Jan. 20 - Feb. 28, 2020 is the Late French Immersion Program submission period for 2020/2021 school year.

This form must be submitted in person by a parent or legal guardian to Central Registration, 2nd Floor, 2121 Lonsdale Avenue, North Vancouver, B.C., V7M 2K6

Student Information <i>Please Print</i>				
LEGAL Last Name		LEGAL First Name		LEGAL Middle Name(s)
<input type="text"/>		<input type="text"/>		<input type="text"/>
<input type="radio"/> Male <input type="radio"/> Female		Birthdate (DD/MMM/YYYY): <input type="text"/>		
Apt #	Address		City	Postal Code
<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>
School/Program Choice				
Current School/Program		North Van Catchment Area School		
<input type="text"/>		<input type="text"/>		
1st and 2nd choices must be from the following schools: Ecole BOUNDARY Elementary Ecole BRAEMAR Elementary				
1st Placement Request		2nd Placement Request		
<input type="text"/>		<input type="text"/>		
Student selection for the Late French Immersion Program will be determined by lottery in a manner that is consistent with NVSD Policy 605. The North Vancouver School District reserves the right to balance enrolment in the LFI program throughout the District.				
Sibling Information (school aged)				
Sibling 1 - Name		Sibling 2 - Name		
<input type="text"/>		<input type="text"/>		
Current Grade:	School:	Current Grade:	School:	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Current Program: <input type="radio"/> LFI <input type="radio"/> FI <input type="radio"/> Eng		Current Program: <input type="radio"/> LFI <input type="radio"/> FI <input type="radio"/> Eng		
Parent/Guardian Information				
Student Lives With: <input type="radio"/> Both Parents <input type="radio"/> Mother Only <input type="radio"/> Father Only <input type="radio"/> Legal Guardian <input type="radio"/> Other: <input type="text"/>				
Parent/Guardian 1		Relationship to Student: <input type="text"/>		
Last Name	First Name	Address (if different from Parent/Guardian 2)		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Email Address	Home Phone	Work Phone	Cell Phone	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Parent/Guardian 2		Relationship to Student: <input type="text"/>		
Last Name	First Name	Address (if different from Parent/Guardian 1)		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Email Address	Home Phone	Work Phone	Cell Phone	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Applicant's Declaration and Agreement				
<p>The information on this form is collected under the authority of the <i>School Act</i>. The information provided will be used for educational programs and administrative purposes, and when required may be provided to health services, social services or support services as outlined in the <i>School Act</i>. The information collected on this form will be protected consistent with the <i>Freedom of Information and Protection of Privacy Act</i>. If you have any questions about the information recorded on this form, please contact the District Principal, Administrative Services.</p> <p><i>I certify that the above information is correct and valid as of this date. I understand that the provision of false information may lead to my child no longer being able to attend the assigned school.</i></p>				
Parent/Guardian Name - <i>Please Print</i>		Parent/Guardian Signature		Date (DD/MMM/YYYY)
<input type="text"/>		<input type="text"/>		<input type="text"/>
For Central Registration Use Only				
Received By:		Date (DD/MMM/YYYY):		
<input type="text"/>		<input type="text"/>		