



F. Person responsible for your educational needs \_\_\_\_\_

G. In case of an emergency, indicate the person you request the school to contact:

<i>First Name</i>	<i>Middle Name</i>	<i>Surname</i>	<i>Phone Number</i>
Relationship to you:	Mother	Father	Legal Guardian
			Other _____ <i>(Please specify)</i>

9. If your first language is other than English, how many years have you spoken or written English? \_\_\_\_\_

10. Primary School Information: Graduation Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
*Month Year School*

11. Additional information you wish to be considered for review of your application should be provided below. For example offices held, prizes won, honors achieved, participation in school clubs or activities such as girl guides, sports etc.

12. Do you wish to request special admission consideration based on financial need? Yes No  
(SCA awards scholarships and book grants annually. To apply you can obtain the form and relevant info by contacting and/or visiting the the SCA Office.)

13. Are you an outstanding athlete with financial need and want to apply for a Sport Scholarship? Yes No  
(If yes, you can apply by obtaining the form and relevant info by contacting and/or visiting the SCA Office.)

14. If your answer to any of the following is **yes** you must submit a full statement of relevant facts on **page 3** of this application form. Also please note that you may be required to furnish the school with copies of all official documentation explaining the final disposition of the proceedings.

a. Have you ever been charged with or subjected to disciplinary action for Scholastic or any other type of misconduct at any educational institution? Yes No

**IMPORTANT**

I understand that this application is for admission to SCA and is valid only for August 2024. I certify that the information given in this application is complete and accurate, and I understand that to make false or fraudulent statements within this application may result in disciplinary action, denial of admission, or invalidation of promotion or diplomas earned.

When accepted to St. Catherine Academy, to secure the acceptance, parents or guardian and accepted applicant must:

- a. attend an Orientation and to make payments promptly.
- b. agree to abide by the policies and the rules and regulations of the school as stated in the **Student Handbook**.
- c. notify the Office of Admission of any change of information I have given prior to my entry to school.
- d. understand that the \$20 cash, cheque, or money order I submit with this application is non-refundable.

\_\_\_\_\_  
Applicant's Digital Signature (*fill in full name above*)

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
*Day Month Year*

\_\_\_\_\_  
Parent's/Guardian Digital Signature (*fill in full name above*)

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
*Day Month Year*

-----**END OF APPLICATION**-----

For Official Use Only

<b>PSE SCORE</b>	<b>MATH</b>	<b>ENGLISH</b>	<b>INTEGRATED SCIENCE</b>	<b>SOCIAL STUDIES</b>	<b>HOUSE</b>

**PRINCIPAL AND TEACHER RECOMMENDATION FORMS MUST BE SUBMITTED IN A SEALED ENVELOPE FOR THE APPLICATION TO BE COMPLETE.**

**ADDENDUM**

If any of your answers to Question 14 is **yes**, you must submit a full statement of relevant facts below; otherwise, ignore this page.

A reminder that you may be required to furnish the school with copies of all official documentation explaining the final disposition of the proceedings.

- a. Have you ever been charged with or subjected to disciplinary action for Scholastic or any other type of misconduct at any educational institution? Explain in great detail the nature of the incidence(s) and their resolutions and outcomes.

\_\_\_\_\_  
Applicant's Digital Signature (*fill in full name above*)

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
*Day Month Year*

\_\_\_\_\_  
Parent's/Guardian Digital Signature (*fill in full name above*)

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
*Day Month Year*