

# Island Catholic Schools International Student Application Form St. Andrew's High School

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Is there an agency assisting you with this application? If yes, please specify.

Yes            No

Name of Agency:

.....

I am applying for the following program:

Academic Program

Short-term Experience Program

.....

Describe briefly why you wish to participate in the ICS International Student Program.

.....

School year applying for (select one):

September 2014 - June 2015

September 2015 - June 2016

September 2016 - June 2017

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# General Information

Student's Family Name

Gender

Male

Female

Student's Given Name

Student's Date of Birth

Student's English Name (if any)

Student's Email Address (if any)

Father's Name

Mother's Name

Father's Date of Birth

Mother's Date of Birth

Father's Occupation

Mother's Occupation

Father's Telephone Number

Mother's Telephone Number

Father's Email Address

Mother's Email Address

Home Address (Street, City, Country, Postal Code)

Local Address (Street, City, Country, Postal Code) If you don't yet have accommodation please leave blank.

.....  
Emergency Contact Person (other than parents)

Name

Telephone Number

Address

Email Address

Is Emergency Contact person in Canada?

If no, please indicate country of residence

Yes

No

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## Personal Information

Do you have any brothers or sisters?

Yes          No

Sibling's Name	Sibling's Age	Sibling's Gender (Boy or Girl)
Sibling's Name	Sibling's Age	Sibling's Gender (Boy or Girl)
Sibling's Name	Sibling's Age	Sibling's Gender (Boy or Girl)

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Have you ever travelled or studied in another country before?

Yes          No

If yes, where?

For how long?

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# Homestay Request

I will require a homestay.

Yes

No, I have a homestay arranged (provide information below)

No, I will reside in Canada with my parents

***If no homestay is required, please skip to the Medical Information section.***

Is the homestay you have arranged with another family member or family friend?

Yes

No

If yes, please identify the relationship

Homestay Host Name

Homestay Host Address

Homestay Host Telephone Number: Home

Homestay Host Telephone Number: Work (primary contact)

Homestay Host Telephone Number: Cellular (primary contact)

Homestay Host Telephone Number: Other (specify)

Homestay Host Email (primary)



# Homestay Information

Describe your personality (check all that apply).

- |                  |                |                   |               |
|------------------|----------------|-------------------|---------------|
| Shy              | Outgoing       | Organized         | Disorganized  |
| Like to talk     | Quiet          | Like to be active | Like to study |
| Don't worry much | Easily worried | Independent       | Friendly      |

Family/Lifestyle Preferences (check all that apply)

- |                              |                                       |
|------------------------------|---------------------------------------|
| Like small children/babies   | Like children aged 6 - 12             |
| Don't like small children    | Grandparents in the home are okay     |
| Single-parent family is okay | Prefer other young people in the home |
| Prefer a quiet home          | Prefer an active family               |
| Prefer no other children     | Like pets                             |
| Prefer no pets               | Like spending time with family        |
| Other (please specify)       |                                       |

Food preferences (check all that apply)

- |                        |                        |                   |
|------------------------|------------------------|-------------------|
| Enjoy eating           | Like a small lunch     | Like a big lunch  |
| Like a small breakfast | Like a big breakfast   | Know how to cook  |
| Enjoy Canadian food    | Enjoy eating new foods | Eat small amounts |
| Concerned about weight |                        |                   |

What are your favourite foods?

What are your least favourite foods?

What hobbies and interests would you like to take part in outside of school?

Do you have any pets at home?

If yes, what kind?

- Yes      No

Do you attend church regularly?

If "yes," please list religion and usual place of worship

- Yes      No

Please provide any additional information to help with homestay family selection.



# Medical Information

Do you have any allergies?

- No
- Yes, medical
- Yes, environmental
- Yes, food

If "yes," to medical, environmental or food, please indicate allergy here. Please also describe what happens to you when you experience an allergic reaction.

Do you have any ongoing health concerns?

- Yes
- No

If "yes," choose all that apply or enter information under "other"

- |                    |                    |                        |
|--------------------|--------------------|------------------------|
| Asthma             | Diabetes           | Epilepsy               |
| Hearing            | Heart condition    | Vision                 |
| Digestive troubles | Frequent headaches | Skin disorder (Eczema) |
| Other              |                    |                        |

Any other conditions? Please describe.

Do you regularly take medications?

If "yes," please describe.

- Yes
- No

Have you ever suffered from any of the following (choose all that apply):

- |                    |                               |                            |
|--------------------|-------------------------------|----------------------------|
| Depression         | Eating disorders              | Drug or alcohol dependency |
| Severe mood swings | Obsessive/Compulsive disorder | Learning disability        |

**Please note: Students are required to purchase medical insurance as arranged by ICS International Students Program**

## Custodian (Guardian)

Citizenship and Immigration Canada (CIC) requires that each student have a custodian (guardian) in the community. We are willing to accept this responsibility should you wish. Please indicate your preference.

Yes, I want Island Catholic Schools to be the custodian for my child (one-time fee required)

No, I have arranged for an adult custodian (guardian) as follows:

Custodian/Guardian's Name

Relationship to Student

Address (Street, City, Province, Postal Code)

Custodian/Guardian's Telephone Number

Fax Number

Custodian/Guardian's Email

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## Program Application

I am applying for the following program:

Academic High School

Short-Term High School

### Academic High School Program

**Please complete this section if you are applying for the Academic High School Program**

I am currently in grade:

I wish to apply for grade:

I wish to:

Graduate in British Columbia

Develop English skills only

I will be on Vancouver Island for (select one or more of the following options):

Short-Term

One Year

Longer than one year

When I have completed this program I intend to (check all that apply):

Apply to a Canadian/US college or university

Apply to a university or college in my home country

I will not be applying to university or college

Other

My current school requires that I take certain courses while in Canada.

If "yes," please list:

Yes

No

### Legalization of Marks

Depending on their home country, some students may need their Canadian Marks legalized upon completion of their ICS International Program. Will you need your marks legalized?

Yes

No

### Required Courses

In order to graduate from a British Columbia high school, students are required to take the following courses:

- ~ English
- ~ Math
- ~ Social Studies
- ~ Science (Physics, Chemistry or Biology)
- ~ Physical Education (Grades 8-10 only)
- ~ Applied Skills/Business Education/Fine Arts
- ~ Planning
- ~ Graduation Transitions



**Elective Courses**

Students are also required to take elective courses that match their personal needs and interests. Please check areas of interest to you. Every effort will be made to accommodate personal interests, however, we cannot guarantee elective course availability or placement.

***Business Education***

- Accounting
- Information Technology
- Marketing
- Law
- Other (specify)

***Fine Arts and Visual Arts***

- Art (General)
- Band (Concert, Jazz)
- Choir (Concert, Jazz)
- Drama/Acting
- ICS Religion (required course)
- Theatre (Musical, Performance)
- Theatre Production
- Other (specify)

Do you play a musical instrument?

Yes      No

If yes, what kind? (List as many as you play)

Can you read music?

Yes  
No

Do you play any sports? If "yes," please list below.

Yes      No

Sport	Level			
	Beginner	Intermediate	Advanced	
Sport	Level			
	Beginner	Intermediate	Advanced	
Sport	Level			
	Beginner	Intermediate	Advanced	

What are your favourite courses in school, and why do you like them?

.....

My English skills are (check one):

How long have you studied English?

Beginner

Intermediate

Advanced

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## Short-Term High School Program

***Please complete this section if you are applying for the Short-Term High School Program***

The Short-Term Program is available mid-September to mid-June. I am applying to attend the Short-Term Program for a period of:

1 - 3 months

6 months

Preferred Start Date

Preferred End Date

Current age

I want to be placed in grade (specify):

.....

Please tell us anything else that will help with school placement.

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## Additional Information

Please tell us how you found out about our program. Check all that apply.

Friend or Family

Education Fair

Canadian Embassy/Consulate

ICS Website

Other website

Newspaper or Magazine

Sibling has attended ICS

Please indicate website, newspaper or magazine name (if applicable)

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## Method of Payment

***Fees are for the application only and are required at the time of application.  
Each application is \$200 (Canadian funds)***

### Credit Card

VISA

MasterCard

Cardholder's Name (as it appears on the card)

Credit Card Number

Expiry Date (as it appears on the card)

I agree to a payment of \$200 Cdn (please type name below)

### Cheque, Bank Draft or Wire Transfer

Cheque or Bank Draft (payable to Island Catholic Schools)

Wire Transfer

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## Refund Policies

Please refer to the [Student/Parent Tuition Fee Schedule](#) for refund policies, as well as additional terms and conditions.

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***Thank you for completing the application for the ICS International Student Program. Please note completion of this form does not constitute acceptance to St. Andrew's Regional High School or Island Catholic Schools. We will be in touch as soon as possible.***

***Please save this PDF document and email to [sonushko@cisdv.bc.ca](mailto:sonushko@cisdv.bc.ca).***

***For further information, please contact [sonushko@cisdv.bc.ca](mailto:sonushko@cisdv.bc.ca) or visit the [Island Catholic Schools website](#).***

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