



# APPLICATION FOR ENROLLMENT

Date stamp
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<b>2022-23 school year will run 4 days per week (Monday thru Thursday)</b>		
Child's name		
Birthdate (dd/mm/yyyy)	Age	Gender
Enrollment for Grade _____		Place of birth
Requested starting date		
Parent(s)/guardian(s)		Parent(s)/guardian(s)
Address _____ _____		Address _____ _____
Phone		Phone
Email		Email
Sibling names/ages		
Previous preschool/school experience and years attended		Previous teacher:
		I give permission for school personnel to contact the above-named teacher.
		Signature: _____ <i>(to be completed during interview)</i>
Please indicate if your child has received any assessments for academic or social challenges.		
Additional information relating to school activities <i>(i.e., allergies, fears, challenges)</i>		
Your child's interests or hobbies		

Please consider my child for enrollment in Evergreen Independent School. I understand that the school may not be able to accept students with specific social, academic or physical challenges. I understand that this form is the first step in the registration procedure. Final registration is completed following an enrollment interview.

Signature \_\_\_\_\_ Print name \_\_\_\_\_

Date \_\_\_\_\_

Occupation and interests of parents/guardians

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How did you hear about Evergreen Independent School?

- Open House       Ready, Set, Learn       Children and Apple Pie fair  
 Family or Friends       Advertising       Website       Other: \_\_\_\_\_

Referred by \_\_\_\_\_

Please forward completed application form to:

**Evergreen Independent School**  
PO Box 166  
3515 Watson Ave.  
Cobble Hill, BC  
V0R 1L0

Phone (250)743-2433

Fax (250)743-2570

Email [evergreen@evergreenbc.net](mailto:evergreen@evergreenbc.net)

Website: [www.evergreenbc.net](http://www.evergreenbc.net)