



## 2024-2025 APPLICATION

### Application Steps

All parts of the application must be completed in order to process your application. Missing information may cause a delay in the processing of your application. All information received will be kept confidential. Please use a separate form for each applicant.

#### STEP 1

Complete this application and return it to Director of Student Placement, Nancy Elliott. Please ensure the following are included in addition to your application:

- Copy of Passport (photo page only)
- Most recent school transcript or report cards from previous 2 school years
- Immunization Records - all international students will also be required to submit proof of recent tuberculosis test.

#### STEP 2

You will receive an invoice. for a deposit with payment instructions. Once payment for deposit is received, the applicant will be scheduled for an interview with Nancy Campbell Academy's Vice Principals, Sonja Rowhani and/or Kristin Schaefer.

#### STEP 3

A Letter of Invitation is issued to the successful candidate with final invoice.

#### STEP 4

Upon receipt of the payment in full, a Letter of Acceptance, Custodianship and Account Statement is mailed to the student. The Letter of Acceptance and Custodianship declaration can be used as evidence to support an application for a Canadian study visa.

### Nancy Campbell Academy Contact Guide for Admissions

GORDON NAYLOR, **Principal | Executive Director**,  
INVITES YOU TO CONTACT

#### NANCY ELLIOTT

Director of Student Placement  
Email: nellott@nancycampbell.ca  
Phone: (519) 272-1900 ext. 1

#### SONJA ROWHANI

Vice Principal  
Email: srowhani@nancycampbell.ca  
Phone: (519) 272-1900 ext. 6

#### CINDY WANG

Administration Officer  
Email: cwang@nancycampbell.ca  
Phone: (519) 272-1900 ext. 2

#### KRISTIN SCHAEFER

Vice Principal  
Email: kschaef@nancycampbell.ca  
Phone: (519) 272-1900 ext. 7

# 2024-2025 APPLICATION



## Student Information

This student is applying to enter grade  in  August  January  
for the school year . Will the student need boarding?  Yes  No

Surname:  Given Names:

Preferred Names:

Date Of Birth:       Country of Origin:

D D M M Y Y

Gender:  Male  Female  Non-Binary  Other If Other:

First Language Spoken:  Other Languages:

Citizenship Status:  Canadian Citizen  Landed Immigrant  Study Permit  Other Citizenship Student  
If Other:

A photo copy of your student's valid Passport (photo page only) MUST be attached to this form

Indicate which passport(s) the student carries:  Place Issued:

Home Address:

Apt:

City  Province/State:  Country:

Postal/Zip Code  Phone:  Fax:

Parent/Guardian 1 Email:

Parent/Guardian 2 Email:  N/A:

Student Email:

## Previous School Information

Name of school most recently attended:

School Address:

City  Province/State:  Country:

Phone:  Period of Attendance - From:  To:

Does the student have any learning disabilities?  Yes  No

Does the student have an I.E.P. (Individualized Education Plan)?  Yes  No

If yes, please explain:

Has the student been identified as gifted?  Yes  No

If yes, please explain:



## Parent/Guardian Information

### Parent/Guardian 1

Name:  (GIVEN)  (SURNAME)

Date Of Birth:        
D D M M Y Y

Relationship to Student:

Home Address:   
(STREET)

(CITY)  (PROVINCE)  (COUNTRY)

Postal/Zip Code:

Phone:

Business Name and Address:

Zip/Postal Code:

Phone:

Email:

Position:

### Parent/Guardian 2

N/A:

Name:  (GIVEN)  (SURNAME)

Date Of Birth:        
D D M M Y Y

Relationship to Student:

Home Address:   
(STREET)

(CITY)  (PROVINCE)  (COUNTRY)

Postal/Zip Code:

Phone:

Business Name and Address:

Zip/Postal Code:

Phone:

Email:

Position:

If additional parents/guardians provide care to the student applicant, please include the information above on a separate sheet and send it in with your application. If parents are separated or divorced, please provide details of custody (family court order)

Report Cards/Correspondence sent to:  Parent/Guardian 1  Parent/Guardian 2  Both

Indicate person(s) responsible for fees:  
 Parent/Guardian 1  Parent/Guardian 2  Both  Other:

Other pertinent information:

### GUARDIAN/CONTACT PERSON OR AGENT WITHIN CANADA (If applicable)

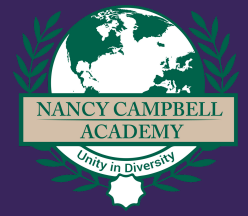
Name:  Relationship:

Address:   
 Apt:

City  Province:

Postal/Zip Code  Phone:  Fax:

Email:



## Medical Information

At Nancy Campbell Academy, our goal is to provide the best care for your child(ren) during the school year. In order to assist us, in this we ask that you complete all parts of this form.

### PERSONAL INFORMATION

Sex assigned at birth:  Male  Female Dormitory rooms are assigned based on sex assigned at birth.

Surname:  Given Names:

Date Of Birth:        
D D M M Y Y

### Part A: For Canadian Students Only

Ontario Health Card Number:

Other Medical Insurance & Policy Number:

Name on Health Card/Plan:

Emergency Contact if Parent/Guardian is unavailable:

	NAME	RELATIONSHIP
Home Phone: <input type="text"/>	Work Phone: <input type="text"/>	

Student's Family Physician:  Phone:

### Part B: For International Students Only

Do you have overseas medical coverage from your home country?  Yes  No

If no, your child(ren) MUST be enrolled in the student medical insurance plan at Nancy Campbell Academy.

### Part C: FOR ALL STUDENTS

Medication(s) currently being taken (please also note how it is to be administered):

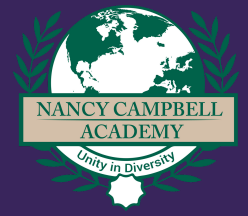
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

### MEDICAL RELEASE: AUTHORIZATION OF CONSENT TO THE TREATMENT OF A MINOR

I/We, as the undersigned parent(s)/guardian(s) of , a minor, do hereby authorize Nancy Campbell Academy or its designated representatives, as agents for the undersigned, to consent to any and all necessary, immediate medical or surgical treatment deemed advisable by any physician or surgeon licensed under the provisions of the Medical Practice Act of Ontario. In this event, I/We agree to pay all costs incurred which may not be covered by the Ontario Health Plan or by my/our other medical insurance policy

Signature of Parent/Guardian

Date:        
D D M M Y Y



## Dietary/Health Information

Does your child follow a specific diet?  No  Vegetarian  Vegan  Gluten-Free  Pescatarian  
 No Pork  Dairy Free

Please list any food allergies or relevant dietary information:

Does the student carry an EPI pen?  Yes  No If yes, for which allergy?

Does the student take any supplements? If so, list:

Over the Counter Medications that the student may take to relieve symptoms of illness (i.e. Tylenol/Ibuprofen for pain, Cough Medicine/Lozenges) List:

Does the student have any health problems other than allergies? If so, list:

Has the applicant ever been under the care of a counselor, psychologist or other health professionals within the last 5 years?  
 Yes  No

If yes, explain:

Has the applicant received any psychological or educational assessment or learning evaluation not required of all students within the last five years?  
 Yes  No

If yes, please explain:

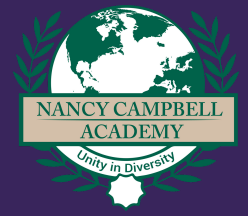
## Residential Preferences

Level of English spoken:  None  Little  Good  Fluent  Native Language

Does the student have a personal computer?  Yes  No

What is the student's preferred study time?  Before School  After School  Evening

Interests/Hobbies:



## General Permissions

Out-of-school activities are a vital part of the learning process for students at Nancy Campbell Academy. Written parental permission is required for all activities planned off school property. This permission will be in effect for the study period for all activities authorized by the school together with their associated travel requirements. I/ We grant permission for the:

- student's transportation in school-arranged vehicles for all NCA arranged activities, including but not limited to special events/field trips/Wildfire Lodge/Public libraries/theatre/recreational and site seeing outings.
- student to travel in vehicles driven by others only when approved directly by me the parent/guardian and put into writing to the school represented by the Residential Advisor. I understand NCA takes no responsibility for students travelling in private vehicles; students do so at their own risk.
- student to sign out to leave campus during the lunch period or after school according to residential rules, at the times guided by Student Code of Conduct or otherwise designated by Nancy Campbell Academy.
- student to stay over-night in private, chaperoned home(s) ONLY with prior written parental approval (via email) that details the destination, departure and arrival times, name and phone number of chaperone/parent of the home.
- school to use any photograph, video tape, or original piece of work written or created by the student for the express purpose of print and web-based promotions, such as newsletters and advertisement

If there is no record of a signed written permission the student will not be allowed to participate in an excursion.

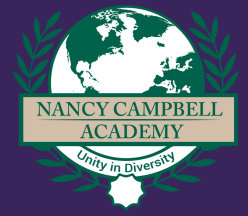
Declaration: I hereby give permission to Nancy Campbell Academy for the student named below, my daughter/son/ward, to participate in any and all excursions as described above. I/we agree to follow all applicable rules and regulations as described in the Student Code of Conduct.

<input type="text"/>	Date:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Printed Name of Parent/Guardian	Signature of Parent/Guardian	D	D	M	M	Y	Y
<input type="text"/>	Date:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Printed Name of Student over 18yrs	Signature of Student over 18yrs	D	D	M	M	Y	Y

## Terms of Application and Enrolment (Continued on next page)

I/WE, THE UNDERSIGNED, do hereby apply for the undersigned applicant to enter grade  at Nancy at Nancy Campbell Academy starting in the month of , 20 , as a  Residential  Day Student. I/We, the undersigned, do therefore jointly and separately agree as follows:

1. That I/we will pay any and all legal fees, charges, levies and assessments as may be rendered, from time to time, by Nancy Campbell Academy in respect to the applicant.
2. That I/we will obey and comply with any and all rules, regulations and policies of Nancy Campbell Academy as articulated in the student handbook.
3. That I/we understand that Nancy Campbell Academy reserves the right to accept or reject applicants, or to withdraw services from students at its sole discretion for reasons which, in the sole opinion of Nancy Campbell Academy, are in the best interests and welfare of the school and its students.
4. That I/we have read and understand the Fee Schedule enclosed with the application package and that I/we understand that the terms stated therein are part of this agreement.



## ■ Terms of Application and Enrolment (Continued from previous page)

5. That I/we agree to pay the deposit invoice of \$1000 CAD for North American applicants and \$5000 for International applicants as an act of commitment and good faith. I/We understand that if for any reason the student is not accepted by Nancy Campbell Academy the deposit will be refunded in full. When the student is accepted the deposit is applied to the first years tuition. It is further agreed that if the student or students family decides not to send the student, \$500 CAD processing and administration fee will be applied. Nancy Campbell Academy requires 60 days written notice for student withdrawals prior to following intake (August and January). No fees will be refunded once school begins. No fees will be refunded in case of student expulsion.

6. That I/we agree to Nancy Campbell Academy's Refund Policy: Nancy Campbell Academy requires 60 days written notice for student withdrawals prior to following intake (August and January). No fees will be refunded once the semester begins. No fees will be refunded in case of student expulsion.

7. That I/we agree for international applicant's, partial refunds apply only where a student visa is denied providing the following conditions are met: The student provides NCA with the official letter of refusal from the Consulate naming the student and other personal particulars; the student returns all original documents provided by NCA for the purpose of acceptance, including the original letter of acceptance and custodial agreement. When a student visa is denied, \$4000 CAD will be refunded and \$1000 CAD will be applied as a document processing fee.

8. That I/we have enclosed
- A. A complete Application for Admission Form
  - B. Deposit of \$1000 CAD (North American students), \$5000 CAD (Overseas students)
  - C. A copy of the applicant's passport (photo page only)
  - D. A recent photograph
  - E. A copy of the applicant's most recent transcript or report cards (previous 2 years)
  - F. A copy of updated immunization records (must be in English)

8. That I/we have read and understand this agreement.

<input type="text"/>	<input type="text"/>	Date:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Printed Name of Parent/Guardian 1	Signature of Parent/Guardian 1		D	D	M	M	Y	Y	
<input type="text"/>	<input type="text"/>	Date:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Printed Name of Parent/Guardian 2	Signature of Parent/Guardian 2		D	D	M	M	Y	Y	
<input type="text"/>	<input type="text"/>	Date:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Printed Name of Student	Signature of Student		D	D	M	M	Y	Y	

If the signatures of all parties are not included, please give a short explanation: