



# St. Maurice School Inc.

1639 Pembina Highway, Winnipeg, Manitoba, Canada R3T 2G6  
Phone: (204) 452-2873 or (204) 453-4020 Fax: (204) 452-4050  
Internet: www.stmaurice.mb.ca Email: info@stmaurice.mb.ca

Application for (circle one): Kindergarten-part time Kindergarten-full time Grade: 1 2 3 4 5 6 7 8 9 10 11 12

Please PRINT all information.

Application for school year: 20\_\_-20\_\_

Student's M.E.T.#: \_\_\_\_\_

Current School: \_\_\_\_\_

Student's Legal Last Name: \_\_\_\_\_ Parent's last name is different

Legal Given Names: \_\_\_\_\_ Gender:  Female  Male

Common Given Name: \_\_\_\_\_ Birth date: Year \_\_\_\_ Month \_\_\_\_ Day \_\_\_\_  
(Please attach a copy of the student's birth certificate)

Citizenship: Student is a  Canadian Citizen†  Permanent Resident\*  Landed Immigrant\*  
†Proof of Canadian citizenship required if born outside of Canada \*Proof of Permanent Resident or Landed Immigrant status is required.  
Note: International Students must complete a different application form.

Student's Address during the school year: \_\_\_\_\_ Siblings already in attendance at St. Maurice School:  Yes  No

Apt. \_\_\_\_ Street No. \_\_\_\_ Street \_\_\_\_\_

City/Town \_\_\_\_\_ Postal Code \_\_\_\_\_

Name of the School Division for the student's home address: \_\_\_\_\_

Student's Home Telephone Number (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Unlisted?  Yes  No

Student's Cellular Phone Number (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (if applicable)

Student's Manitoba Health Number \_\_\_\_\_ and Student's PHIN: \_\_\_\_\_

Student's Religion:  Roman Catholic  Other: \_\_\_\_\_

Catholic Parish (if applicable) \_\_\_\_\_

The student has already received the following sacraments:  Baptism\*  Penance  Eucharist  Confirmation  
\*Please attach a copy of the student's baptismal certificate, if applicable.

Has the student ever attended a religion-affiliated school:  yes  no

If yes, name of school: \_\_\_\_\_

**ALSO COMPLETE THE BACK**

## ST. MAURICE SCHOOL - OFFICE USE ONLY

Date Received: \_\_\_\_\_

Application fee paid for this applicant: \$

Grades of family siblings also applying:

<input type="checkbox"/> copy of Birth Certificate received <input type="checkbox"/> proof of Permanent Resident / Landed Immigrant Status received (if not a Canadian citizen) <input type="checkbox"/> copy of Baptismal Certificate received <input type="checkbox"/> copy of most recent Report Card received <input type="checkbox"/> copy of Transcript (if applying for Grades 11 or 12) <input type="checkbox"/> Sending School Questionnaire received <input type="checkbox"/> Entrance Exam scheduled (for Grades 7-12) <input type="checkbox"/> Interview Scheduled (for K, 1, 7-12)	<input type="checkbox"/> Acceptance letter <input type="checkbox"/> Conditional Acceptance letter: <input type="radio"/> Grade 10, 11, 12 <input type="radio"/> Special Condition(s) <input type="checkbox"/> Waiting List Letter <input type="checkbox"/> Non-Acceptance Letter (and partial refund)  Administrator's Signature: _____  Home Room placement (if accepted): _____
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Please PRINT all information:

**FATHER** (  Custodial Parent /  Legal Guardian)      **MOTHER** (  Custodial Parent /  Legal Guardian)  
 The School may request proof of legal custody or guardianship.

Full Name:		Full Name:	
Title:	Mr. Dr. Other: _____	Title:	Mrs. Miss Ms. Dr. Other: _____
Address:		Address:	
Postal Code:		Postal Code:	
Home Phone:	(     )	Home Phone:	(     )
Religion:		Religion:	
Occupation:		Occupation:	
Employer:		Employer:	
Bus. Phone:	(     )	Bus. Phone:	(     )
Cell Phone:	(     )	Cell Phone:	(     )
Email*:		Email*:	

The email address supplied above should be one that may be used by school staff for confidential communication with the parent(s).

Please provide the name of an adult relative or friend who we may also contact in the case of an emergency:

Emergency Contact Name:		Relationship to Student:	
Phone Number:		Alternate Phone/ Cell #:	

**I hereby grant the St. Maurice School Administration permission to request any and all information and records they may require for the application process.** Information collected under the conditions of the St. Maurice School Privacy Statement (available in print from the school’s General Office, or at [www.stmaurice.mb.ca](http://www.stmaurice.mb.ca))

**The student referred to in this Agreement is a Canadian citizen or permanent resident residing in Manitoba with a parent(s) or legal guardian(s). All information supplied with this application is correct and factual.**

**Religious Instruction: I understand and accept that all students attending St. Maurice School are required to take part in Religion. Religion courses and activities such as religious retreats are compulsory at all levels. Attendance at grade Masses and school Masses is an integral and compulsory part of the Religion program.**

**If accepted, I agree to make myself familiar with the school’s rules and to ensure that my son/daughter complies with them. I further agree to accept all financial responsibility and to submit in due course (as outlined in the registration information I have received) the tuition and other fees required.**

\_\_\_\_\_  
SIGNATURE OF PARENT / GUARDIAN

\_\_\_\_\_  
DATE