
Kingston, Ontario CANADA

LIMESTONE DISTRICT SCHOOL BOARD

STUDENT APPLICATION FORM

To ensure that your application form is processed as quickly as possible, please follow these guidelines:

1. Type or print clearly.
2. Answer all questions completely and sign where required.
3. Forward also the necessary additional documentation:
 - Student's academic transcripts from the past two years.
 - Immunization record
 - Passport copy
4. Fax, mail or e-mail the documents to:

Address: **The Limestone District School Board
International Education**
Postal Bag 610, 220 Portsmouth Avenue
Kingston, Ontario
CANADA K7L 4X4

E-Mail: international@limestone.on.ca

Fax: +1-613-544-6804

Telephone: +1-613-544-6925 Ext.212

Web site: www.studykingston.com

INTERNATIONAL EDUCATION PROGRAM STUDENT APPLICATION FORM

Limestone District School Board

Date of Application _____

Student's Information

Full Name:	_____	_____
	Last Name	First Name
	_____	_____
	Middle Name	English Name (if you have)
Date of Birth:	____/____/____	Age: _____ Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
	Day Month Year	
Citizenship:	_____	First Language: _____ Second Language: _____
Address:	_____	
	Street	

	Province	Country Postal Code
Phone:	_____	Fax: _____
E-mail:	_____	

Academic

When do you speak English? (Please check all that apply)

At school With friends At home At Never

How do you rate your vocabulary level of English?

Extensive Can carry on conversation Basic words Never

How do you rate your written level of English?

Can write extensive essay Can write letter, e-mail or memo Cannot write

How many years have you studied English? _____ Current Grade: _____

When do you want to start school? 1st semester (September) 2nd semester (February)

How long do you plan to stay? 1 semester 2 semesters longer

What is your goal?

Graduate from secondary school in Canada
 Attend university / college in Canada
 Develop English skill only
 Other _____

Health

Allergies: _____

Medications: _____

Other Pertinent Health Information: _____

INTERNATIONAL EDUCATION PROGRAM STUDENT APPLICATION FORM

Limestone District School Board

Local Contact Person (if applicable)

Full Name:	_____	_____
	Last Name	First Name

	Relationship	
Address:	_____	
	Street	

	Province	Country
		Postal Code
Phone:	_____	Fax: _____
E-mail:	_____	

Student & Parent Responsibilities

A successful experience in the International Education Program of the Limestone District School Board depends upon regular class attendance, completion of all homework and assignments, and participation in all activities offered by the program.

I acknowledge that the International Education Program of the Limestone District School Board reserves the right to dismiss the students and return them home, at their own expense, without tuition refund for violating any of the rules set out by the program which are:

- violation of school rules (frequent absences, fighting, misbehavior, academic dishonesty and/or lack of achievement in academic studies)
- driving without a driver's license
- use of alcohol or illegal drugs
- holding a paying job
- breach of homestay rules and expectations
- engaging in any illegal activities
- any other behavior or conduct that may be deemed inappropriate by Limestone District School Board and its staff

I therefore, agree to uphold the rules and regulations, and cooperate with administrators, teachers and the students in the Limestone District School Board.

I have read and understand the Refund Policy and I acknowledge that the International Education Program of the Limestone District School Board reserves the right to dismiss students and return them home, at the parents' expense, without tuition refund for violating any of the program rules or the laws of Canada.

Signature of Student

Date

Signature of Parent

Date