

Medical Information

Important: The personal information collected relates directly to and is necessary for program operation and will be kept confidential in compliance with the Freedom of Information and Protection of Privacy Act.

Immunization Record: When was your child last immunized for:

Tetanus/Diphtheria: _____ Polio: _____

In British Columbia, students in 9th grade are offered Tetanus/Diphtheria booster immunizations. Immunization is voluntary, therefore, it is important to discuss the issue of immunization with your healthcare practitioner before signing this consent and especially if your child:

- Has a serious illness
- Is receiving cortico steroids or other immunosuppressive drugs
- Has a history of a shock-like allergic reaction (anaphylaxis) to a previous dose of diphtheria-tetanus
- Has an allergy to thimerosal

Do you want your child's immunization updated? Yes No

If yes, please sign the following consent.

I have read or had explained to me the information on the vaccines listed below and I believe I understand their benefits, risks, contraindications, and side effects. I have had the opportunity to ask questions which were answered to my satisfaction. I request that the student named herein be immunized when requested again: (circle as appropriate)

DIPHTHERIA

TETANUS

 Date

 Signature: Parent/Legal Guardian

Has your Child had any major illnesses, surgeries or chronic diseases that we should be aware of in the event of an emergency?

- 1.
- 2.
- 3.

If your Child suffers from allergies, please list them including any reactions they may have had.

- 1.
- 2.
- 3.

Family Doctor: _____ **Phone No:** (_____) _____ **Date of last visit:** _____

Note: Fountainview Academy is located 25 kilometers from the nearest medical facility. Students with minor illnesses are examined by the campus nurse or dean but will not normally be taken for treatment unless the illness persists, becomes serious, or we are directed to do so by the parent. If you have any special concerns in this regard please advise the Director of Student Life.

Activities Approval

As part of the Fountainview Academy's balanced program of education, recreation, and spirituality, we offer unique programs in physical education, leadership, and outreach as part of our standard curriculum. These programs form an integral part of our educational philosophy and require frequent travel, outdoor pursuits, and fitness training. At times these trips may necessitate travel to provinces outside of British Columbia and into the United States. Please indicate below your consent/non-consent for your child to participate in our programs.

Yes, I grant my son/daughter/ward permission to participate in **ALL** of the Activities.

Yes, I grant my son/daughter/ward permission to participate in outreach activities, however he/she may not participate in activities as checked below:

No

- Motor biking
- Canoeing
- Weight training
- Ice skating
- Horsebackriding

No

- Mountainbiking
- Cross-country running
- Camping
- Choir/quartet/strings
- Activities in the community of a humanitarian/spiritual nature

No

- Hiking
- Ropes training
- Water skiing
- Snow Shoeing
- Ingathering trips

 Date

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 Signature: Parent/Legal Guardian

Educational Information

List schools attended or home school programs from the 8th grade to current year:

Gr.	Year	School	Address	Phone
8				
9				
10				
11				

Note: Please send copies of your child's grades or grade reports from 8th grade to the present.

Is your child enrolled in any correspondence courses? Yes No If yes, please list schools and subjects:

Does your child have any difficulty learning? Yes No If yes, please explain

Does your child desire special help in any subject? Yes No If yes, which subject(s)?

If your child plays a musical instrument, which kind and for how long? _____

Financial Information

	CDN/USA Students	International Students
GENERAL FEES		
Registration Fee	\$ 200.00	\$ 200.00
Textbook/Yearbook Fee	\$ 275.00	\$ 275.00
Room Deposit	\$ 100.00	\$ 100.00
Tuition	\$ 10,700.00	\$ 11,200.00
Annual Total	\$ 11,275.00	\$ 11,875.00

PAYMENT SCHEDULE		
Initial Payment at Registration	\$ 1,645.00	\$ 6,275.00
Monthly Tuition Payment (each of the 9 remaining months)	\$ 1,070.00	n/a
Second Semester Payment	n/a	\$ 5,600.00

ADDITIONAL FEES (if applicable)		
Application Fee	\$ 25.00	\$ 25.00
BC Medical Insurance	\$ 850.00	\$ 850.00
Graduation Fee (Grade 12 Students)	\$ 100.00	\$ 100.00
Additional Music Lessons		
Additional 15 minutes for any instrument	\$ 240.00	\$ 240.00
Second instrument (16 half-hour lessons or 8 longer off campus lessons)	\$ 720.00	\$ 720.00
Note: All amounts are in Canadian dollars		

Do you have an unpaid bill at any other school? Yes No If yes, what amount? _____
 School _____ Address _____ Phone: _____

Parental Acknowledgement

I have read the Student Handbook and I understand the educational philosophy of Fountainview Academy. I desire to have my child attend Fountainview Academy and I willingly pledge to support the high ideals and standards of the school.

The information I have provided above with regard to activities correctly represent my wishes for my child/ward. I agree to assume all financial responsibility for the applicant.

Signature of Parent/Guardian _____

Date: _____

Application Procedure

To Complete the application process, please check to see that items 1-5 are returned to us and that the reference forms (item 6) have been distributed appropriately.

- 1. Complete and signed application form;
- 2. Non-refundable application fee (see financial section pg. A3);
- 3. Complete essay (see pg. A5);
- 4. A copy of grades or reports from grade 8 to the present;
- 5. A copy of the applicant's birth certificate; and
- 6. Character references from the following three persons (see pg. A7):
 - a) your pastor or head elder,
 - b) a principal/teacher who has taught you recently.
 - c) some other person who knows you well (a non-relative),

Note: We have found that references generally delay the application process. Please encourage your references to respond as soon as possible directly to Fountainview Academy, Attention: Admissions. You may consider providing them with stamped envelopes.

When all six items above are received in our office, we will contact you by phone to arrange a telephone interview or a visit. We encourage you to visit out campus if at all possible. Feel free to bring your family – accommodations will be provided free of charge.

Thank you for taking the time to apply. We pray for a special blessing on each applicant as you seek an education that will build character for eternity.

Section 3 - Office Use Only

Date received: _____ Reg. No.: _____ PEN: _____

Interviewed by: _____ Date: _____

Date reviewed by Admissions Committee: _____ Action no: _____ Accepted Denied

Comments:

Student Reference Form



PO Box 500 Lillooet, BC Canada, V0K 1V0 Ph: (250) 256-5400 Fax: (250) 256-5499 email: info@fountainview.bc.ca

Applicant

Name:

Appraisal

The above named individual is applying to become a student at Fountainview Academy. Your honest and candid appraisal will assist us in making an informed decision regarding this student's compatibility with our spiritual, academic, and physical program. This referral will be kept strictly confidential; please mail it directly to Fountainview Academy, Box 500, Lillooet, BC V0K 1V0 Attention: Admissions

For how long have you known the applicant?

In what capacity have you known him/her?

Please mark the bracket that best identifies the applicant's standing with the word descriptors provided to the left and right of the scale below. Underline any descriptors, cross out unsuitable ones, or add your own descriptors in the comments section.

		⇌ Weaker	1	2	3	4	5	Stronger ⇌	Comments
1.	Spirituality	immature, stagnating, antagonistic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	strong, stable, growing, willing, open	
2.	Relation to authority	antagonistic, sullen, outward obedience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	cooperative, intelligently submissive	
3.	Integrity	needs constant supervision, underhanded	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	very trustworthy, dependable, conscientious	
4.	Service attitudes	indifferent, withdrawing, self-centered	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	unselfishly helpful, takes initiative, compassionate	
5.	Intellect	sluggish, dull, listless, slow, slow learner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	very apt, superior, creative, learns easily	
6.	Scholastic application	unmotivated, satisfied with defective work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	highly motivated, aims for perfection	
7.	Judgement (reasoning ability)	rash, foolish, lacks common sense, headstrong	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	careful, sound, wise, teachable	
8.	Emotional stability	tense, excitable, often loses control, moody, fearful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	self-controlled, well-balanced, serene, happy	
9.	Personal appearance	slovenly, worldly, faddish, careless	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	crisp, modest, neat, well-groomed	
10.	Manners	coarse, rough, affected, false, uneducated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	refined, courteous, properly educated	
11.	Conversation	vulgar, coarse, sentimental, shallow, bad	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	pure, kind, true, sensible, uplifting, holy	

		⇐ Weaker	1	2	3	4	5	Stronger ⇒	Comments
12.	Social acceptance	disliked, few friends, clingy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	well-liked, many friends, leader	
13.	Friendships	no standards, careless in choice, no discrimination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	wise, discriminating, circumspect, chooses friends with high standards	
14.	Industriousness	lazy, gets by, unmotivated, unwilling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	enthusiastic, good products, willing worker	
15.	Relation to opposite sex	very flirty, secretive, sentimental, attached	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	circumspect, open, healthy, very orderly	
16.	Health	weak, often incapacitated, low vitality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	vigorous health, energetic	
17.	Parent's financial responsibility	poor risk, not a priority to pay bills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	very responsible, bills paid currently	
18.	Influence on others	detrimental, passive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	strong for good, helpful	

Has the applicant had any trouble concerning conduct in school or elsewhere?

If so, what was the nature of the problem?

The applicant has used: drugs, alcohol, tobacco, none to my knowledge.

If you had a child at this school, would you be willing for the applicant to room with him or her?

Do you believe the applicant really wants to attend Fountainview?

What has been the home environment (stability, discipline, etc.) of the student?

Please give any further information that would be helpful in evaluating this applicant or in guiding him/her as a student.

Please check one:

To become a member of the student body of Fountainview, the applicant is:

- highly recommended
- recommended
- recommended with reservation
- not recommended under the present circumstances
- not recommended under any circumstances

Endorsement

Signature:

Date:

Print name:

Occupation:

Address:

Phone: