



ST. HELEN'S SCHOOL

3894 TRIUMPH SREET, BURNABY, B.C. V5C 1Y7

Phone: (604) 299-2234 Fax: (604) 299-3565

Email: office.shel@cisva.bc.ca Website: www.sthelensschool.ca

KINDERGARTEN REGISTRATION 2018



Next year we will only have one kindergarten class and space will be limited. We will be selecting only qualified candidates for interviews following our admission policy guidelines.

1ST STAGE

Interviews will take place according to the admissions policy during the first part of December 2017

2nd STAGE (If Necessary)

Interviews will take place during the second week of February 2018

APPLICATION MUST BE SUBMITTED BEFORE INTERVIEWS BY E-MAIL OR IN PERSON AT THE SCHOOL OFFICE BY NOVEMBER 24th, 2017.

School Mission Statement

St. Helen's School is a Catholic Community of dedicated educators with Christ as our center. It is our purpose to fully develop the spiritual, intellectual, physical, social, and emotional growth of the students with special regard given to the individuality of each child, enabling them as Christians to live, share, and serve in the community while striving for personal excellence in all endeavors.



ADMISSION POLICY

As per the policy of the Superintendent's office for all Catholic Schools in the Vancouver Archdiocese; the following is the priority list for admission to St. Helen's School.

For purposes of this policy, “practicing Catholics” shall mean those individuals who are registered in a parish and attend Sunday Mass regularly, “active in a parish” shall mean those who support the parish by using envelopes (no minimum amount specified) and participate in the work activities required of them.

1. Children presently enrolled in the school if they and their families meet the expectations of the school.
2. Siblings of children already in the school whose families are practicing Catholics and active in our parish.
3. Children whose families are practicing Catholics active in our parish.
4. Siblings of children already in the school whose families are practicing Catholics active in other parishes.
5. Children whose families are practicing Catholics coming into the parish who have been attending Catholic school elsewhere.
6. Children whose families are practicing Catholics active in other parishes.
7. Children whose families are either not practicing Catholics or not active in their parishes.
8. Non-Catholics. Once accepted into the school, non-Catholics need only meet the criteria expected of other students to be re-admitted in subsequent years. Siblings of non-Catholics cannot be given priority over Catholics.

* It is the Pastor's prerogative and responsibility to decide upon an admission of a family where there is financial difficulty and/or inability to participate in the Participation Program. The Pastor may decide to grant them "Special Consideration".

SPECIAL CONSIDERATION

It is the policy of St. Helen's School that no child will be refused a Catholic education because of financial difficulty. If your family is experiencing financial hardship, you should contact your pastor to discuss financial assistance in helping you to meet your tuition payments. It is also accepted that there may be a serious problem prohibiting a family from participating in the Participation Program. The pastor, on an individual case basis, will determine the assistance to needy families.

ST. HELEN'S SCHOOL

3894 Triumph Street

Burnaby, B.C.

V5C 1Y7

APPLICATION FORM 2018/ 2019

Legal Family Name: _____ **Child's Legal Name:** _____

Male [] **Female** [] **Legal Middle Names:** _____

Address: _____ **Date of Birth:** _____

City: _____ **Place of Birth:** _____

Postal Code: _____ **Citizenship:** _____

Home Phone #: _____ **Present School:** _____

Grade in 2018/ 2019 _____ **Care Card:** _____

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Father's Name: _____ **Mother's Name:** _____

Occupation: _____ **Occupation:** _____

Email Address: _____ **Email Address:** _____

Work Number: _____ **Work Number:** _____

Citizenship: _____ **Citizenship:** _____

Parishioner of St. Helen's: _____ **Sunday Envelope #:** _____

Other Parish (Please specify) _____

Catholic: _____ **Non Catholic:** _____ **Catholic:** _____ **Non Catholic:** _____

Pastor's Signature: _____ **Tuition Category** _____

THIS APPLICATION MUST BE RETURNED TO THE SCHOOL OFFICE WITH THE **ORIGINAL BIRTH AND BAPTISM CERTIFICATES AT YOUR EARLIEST CONVENIENCE**. THIS APPLICATION WILL BE KEPT ON FILE UNTIL DECEMBER 31ST, 2017 AFTER WHICH TIME THOSE FAMILIES WHO STILL WISH TO BE ON THE WAITING LIST WILL BE EXPECTED TO RENEW THEIR APPLICATION FORM.

I UNDERSTAND THIS IS ONLY AN APPLICATION AND DOES NOT CONSTITUTE REGISTRATION. I AM AWARE THAT IF THERE IS AVAILABLE SPACE, I WILL BE CONTACTED REGARDING REGISTRATION.

(Signature)

(Date)

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FOR OFFICE USE ONLY: **BIRTH CERT.** _____ **BAPTISM CERT.** _____

SIBLINGS: **NAME:** _____ **GR.** _____ **D/O/B** _____

NAME: _____ **GR.** _____ **D/O/B** _____

(Date Received)