

ST. HELEN'S SCHOOL
3871 Pandora Street
Burnaby BC, V5C 2A6
APPLICATION FORM 2024/25

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

Male [] **Female** []

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

Postal Code: _____ **Citizenship:** _____

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

Are there any social/emotional, behaviour concerns or learning support needed? **YES** _____ **NO** _____

Grade in 2024/2025 _____ **Care Card/Private Medical Insurance:** _____

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

Occupation: _____ **Occupation:** _____

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

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

Cell#: _____ **Cell#:** _____

Citizenship: _____ **Citizenship:** _____

*If the Parent is a Permanent Resident or has a Work/Study Permit, please send a copy along with a copy of your child's birth and baptism/communion certificates.

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

Other Parish (Please specify) _____

(Father) Catholic: ____ **Non Catholic:** ____ **(Mother) Catholic:** ____ **Non Catholic:** ____

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

****THIS APPLICATION MUST BE RETURNED TO THE SCHOOL OFFICE WITH THE ORIGINAL COPY OF BIRTH, BAPTISM, AND 1ST COMMUNION CERTIFICATES AT YOUR EARLIEST CONVENIENCE. THIS APPLICATION WILL BE KEPT ON FILE UNTIL THE END OF THE YEAR AFTER WHICH TIME THOSE FAMILIES WHO STILL WISH TO BE ON THE WAITING LIST WILL BE**