

Student # \_\_\_\_\_

*Time and Date of receipt of this form must be recorded by the requested school*

**GRADE 1 - 12**  
**NON-CATCHMENT APPLICATION FORM**  
**for 2017/18 School Year**

FORM 301-1

**IMPORTANT**

**TO THE PARENT**

1. Complete Part A.
2. Leave the completed form with the Principal of the requested school on Monday, February 6, or shortly thereafter.

**TO THE PRINCIPAL OF THE REQUESTED SCHOOL**

1. Upon receipt of application, fax copies to current or catchment school.
2. Once approved, complete Part B and advise current or catchment school and the Superintendent's Office.

**Note:** *Students applying to Delta for the first time should attach a copy of their most recent Report Card.*

Priority will be given to applications received prior to March 3. Decisions regarding approval of applications submitted by March 3 will be made by June 2 or shortly after. Application may be made at other times, however, decisions regarding approval of applications received after March 3 may not take place until after June 2.

**PART A - To be completed by the Parent (one form per child)**

1. Student Name(s): \_\_\_\_\_ Birthdate: MM DD YY \_\_\_\_/\_\_\_\_/\_\_\_\_ Present Grade: \_\_\_\_\_
2. Address: \_\_\_\_\_ City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_ Alternate No. \_\_\_\_\_
3. Living in Attendance Area of: \_\_\_\_\_ Current School: \_\_\_\_\_
4. School Requested: \_\_\_\_\_ Effective Date: \_\_\_\_\_ Grade \_\_\_\_\_ F.I.
5. Additional School(s) Requested: \_\_\_\_\_
6. Name of Parent: \_\_\_\_\_ Parent Email: \_\_\_\_\_
7. Address same as above [ ] or: \_\_\_\_\_
8. Reason for Request required from Parent (if space insufficient, attach letter): \_\_\_\_\_

**SPECIAL LEARNING NEEDS:** Are there any special learning needs or other services of which school personnel should be made aware, which would relate to the programming needs for your child?  **YES**  **NO**  
If yes, please describe:

9. Siblings already in requested school?  **YES**  **NO**

**This request will be considered on the following conditions:**

1. Space and a suitable placement are available in the school requested.
2. Parents are responsible for transportation when the student attends a school outside of the designated school attendance area, and agree to abide by school expectations of policies, including school parking and traffic requirements.
3. *For Secondary Students - Approval of this application may affect your opportunity to compete on school sports teams.*

DATE OF APPLICATION \_\_\_\_\_

SIGNATURE OF PARENT \_\_\_\_\_

**PART B - To be completed by the Principal of the requested school.**

THE ABOVE NON-CATCHMENT APPLICATION IS: **APPROVED**  **DATE** \_\_\_\_\_

Principal's Signature: \_\_\_\_\_