

## Application for Admission

Please print in block letters using black or blue ink and complete in full to avoid processing delays.

### CANDIDATE INFORMATION

Name: \_\_\_\_\_  
*Last First Middle*

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
*Month Day Year*

Home Address: \_\_\_\_\_ City \_\_\_\_\_

Province: \_\_\_\_\_ Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Preferred e-mail address for admission correspondence: \_\_\_\_\_

How did you first hear about Peak Academy?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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### CANDIDATE'S SPORT HISTORY

Primary Sport/Activity: \_\_\_\_\_

Number of Years Playing Sport: \_\_\_\_\_

Current Level of Competition: \_\_\_\_\_

Position: \_\_\_\_\_

Secondary Sport/Activity: \_\_\_\_\_

Number of Years Playing Sport: \_\_\_\_\_

Current Level of Competition: \_\_\_\_\_

Position: \_\_\_\_\_

Other Sports/Activities of Interest:

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

### CANDIDATE ACADEMIC HISTORY

Current School: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

<i>City</i>	<i>Province</i>	<i>Postal Code</i>
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Current Grade: \_\_\_\_\_ Current Average: \_\_\_\_\_

Any previous schools attended in the last 3 years:

Name: \_\_\_\_\_ Dates attended: \_\_\_\_\_

Name: \_\_\_\_\_ Dates attended: \_\_\_\_\_

Name: \_\_\_\_\_ Dates attended: \_\_\_\_\_

Has the applicant skipped a grade? YES / NO Which Grade?: \_\_\_\_\_

Has the applicant repeated a grade? YES / NO Which Grade?: \_\_\_\_\_

Areas of Academic Interest:

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

## LANGUAGE SKILLS

What is the candidate's first language? \_\_\_\_\_

What other language(s) does he or she speak/write? \_\_\_\_\_

If the candidate's first language is NOT English, please answer the following questions:

How would you rate the candidate's level of English? (please circle)

*Beginner      Intermediate      Advanced*

What language does the candidate speak at home? \_\_\_\_\_

## FAMILY INFORMATION

Father's Name: \_\_\_\_\_  
*First                                      Middle                                      Last*

Home Address: \_\_\_\_\_  
\_\_\_\_\_  
*City                                      Province                                      Postal Code*

Occupation: \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_

Bus. Phone: (\_\_\_\_\_) \_\_\_\_\_

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_

Fax Number: (\_\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

Mother's Name: \_\_\_\_\_  
*First                                      Middle                                      Last*

Home Address: \_\_\_\_\_  
\_\_\_\_\_  
*City                                      Province                                      Postal Code*

Occupation: \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_

Bus. Phone: (\_\_\_\_\_) \_\_\_\_\_

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_

Fax Number: (\_\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

Are parents separated? YES / NO    Divorced? YES / NO

If YES, who has legal custody? \_\_\_\_\_

Candidate's Siblings:

_____	/	_____	/	_____	/	_____
<i>Name</i>		<i>Age</i>		<i>Grade</i>		<i>Current School</i>
_____	/	_____	/	_____	/	_____
<i>Name</i>		<i>Age</i>		<i>Grade</i>		<i>Current School</i>
_____	/	_____	/	_____	/	_____
<i>Name</i>		<i>Age</i>		<i>Grade</i>		<i>Current School</i>

### CANDIDATE MEDICAL HISTORY

Does the candidate have any allergies?    YES / NO

If YES, please list them: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Does the candidate have any documented medical issues?    YES / NO

If YES, please list them: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Does the candidate take any medication on a regular basis? YES / NO

If YES, please list them: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date