



A Separate Application Is Required For Each Child.

Completion of This Application Does Not Constitute an Approval of the Request.

**APPLICATION FOR SCHOOL TRANSFER 2008-2009**  
**DEADLINE FOR APPLICATION IS MARCH 1, 2008**

Elementary   
 Secondary

**Student's First Name:** \_\_\_\_\_ **Surname:** \_\_\_\_\_  
**Permanent Address:** \_\_\_\_\_  
**City/Town:** \_\_\_\_\_ **Province:** Québec **Postal Code:** \_\_\_\_\_  
**Mother's Name:** \_\_\_\_\_ **Father's Name:** \_\_\_\_\_  
**Work/Home Phone Number:** \_\_\_\_\_ **Work/Home Phone Number:** \_\_\_\_\_

**\*\*To Complete the Following Questions Please Use the Legend Provided Below\*\***

1 Present School 2007-2008	2 Current Cycle/Year 2007-2008 <i>**See Legend Below**</i>	3 Boundary School 2008-2009	4 Projected Cycle/Year 2008-2009 <i>**See Legend Below**</i>	5 School Requested 2008-2009	6 ENG or F.I.?
	/		/		

Please write the reason(s) for your request below:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. Name Of Siblings Presently in School	Current Cycle/Year	Current School (07-08)
	/	
	/	
	/	

**\*\*LEGEND\*\*:**

- Present School:**  
The school in which your child(ren) is/are currently registered and attending classes.
- Boundary School:**  
The street on which you live places you in a school boundary or catchment area.
- School Requested:**  
Name the school that you are requesting your child(ren) attend for the next school year.
- Which Program ENG or French Immersion?**  
Many of the schools have the regular program which is English, or French Immersion program which all or some of the courses are conducted in French. Please list one or the other (EN or FI).
- Other Siblings in Which School & Grade:**  
Please name the other children, their present Cycle and the school, which they presently attend.

**2. and 4.**

Cycles as defined in the Quebec Education Program	
GRADE	CYCLE/YEAR
K	KINDERGARTEN
1	CYCLE 1/YEAR 1
2	CYCLE 1/YEAR 2
3	CYCLE 2/YEAR 1
4	CYCLE 2/YEAR 2
5	CYCLE 3/YEAR 1
6	CYCLE 3/YEAR 2
Sec. I	CYCLE 1/YEAR 1
Sec. II	CYCLE 1/YEAR 2
Sec. III	CYCLE 2/YEAR 1
Sec. IV	CYCLE 2/YEAR 2
Sec. V	CYCLE 2/YEAR 3

**N.B. PLEASE REGISTER YOUR CHILD/CHILDREN IN YOUR BOUNDARY SCHOOL UNTIL YOU RECEIVE WRITTEN CONFIRMATION ON THE DECISION OF YOUR APPLICATION.**

**TRANSPORTATION IS NOT NECESSARILY PROVIDED IF A CROSS-BOUNDARY REQUEST IS APPROVED.**

Please return this form to:

**Mike Dawson**  
**Director General**  
 Fax: (819) 684-6810

OFFICE USE ONLY:		
New: <input type="checkbox"/>	Entered in GPI: <input type="checkbox"/>	Transfer: <input type="checkbox"/>
Renewal: <input type="checkbox"/>	Updated in GPI: <input type="checkbox"/>	Cross-boundary: <input type="checkbox"/>
Late: <input type="checkbox"/>	Approved/Denied: <input type="checkbox"/>	

\_\_\_\_\_  
 Parent/Guardian's Signature

\_\_\_\_\_  
 Date