



The Distillery District, 50 Gristmill Lane, Toronto Ontario M5A 3C4
Telephone: 416-691-4639 • Fax: 416-691-3722
• www.voiceintegrative.com

ADMISSIONS APPLICATION FORM

Please Print Clearly

Application for Grade: _____ Commencing Year: _____
Student Name: _____ Age: _____ DOB: _____
Last Middle First Month / Day / Year
Male Female Student resides with: Both Parents Father Mother Guardian

Parent/Guardian Name: _____ Address: _____ Postal Code: _____ Telephone (home): () _____ E-mail: _____ Cell: () _____ Telephone (work): () _____ Employer: _____ Occupation: _____ Additional Information as required: _____	Parent/Guardian Name: _____ Address: _____ Postal Code: _____ Telephone (home): () _____ E-mail: _____ Cell: () _____ Telephone (work): () _____ Employer: _____ Occupation: _____ Additional Information as required: _____
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Name of Current School: _____
Telephone: _____
Name of up to 2 previous schools your child has attended if different from current school:

V.I.S. (Voice Integrative School) is a non-denominational, co-educational, independent school for students in grades 1 to 8. If your child is accepted, the school administrator reserves the right to ask for the removal of any student who repeatedly fails to comply with the code of behaviour expected by the school. I understand that under the above circumstance, tuition is non-refundable.

My child has or has had an IEP Yes No

My child has been identified with Special Education needs. Yes No

If yes, please identify type of identification, ie. gifted, LD, behavioral, etc.: _____

PARENT /GUARDIAN (PRINT)	PARENT/GUARDIAN (SIGNATURE)	DATE
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PARENT/GUARDIAN (PRINT)	PARENT/GUARDIAN (SIGNATURE)	DATE
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