



Please attach or provide a recent photograph of the applicant.

Montcrest

discover • develop • thrive

OUR MISSION

Montcrest is a co-educational community, small enough to honour the individual and big enough to provide an exceptional academic experience with balanced opportunities in leadership, the arts, and athletics. Our school challenges children to discover and acknowledge their own voices, so they can understand and make meaningful connections with the world.

CONFIDENTIAL APPLICATION FOR ADMISSION

APPLICANT INFORMATION

Applying to Grade _____ for September 20_____

Last Name _____ First Name _____

Middle Name _____ Preferred Name _____

Male Female Date of Birth: Month _____ Day _____ Year _____

Current School _____ Current Grade _____

May we contact your child's school for more information? Yes No

Current Teacher's Name _____ School Phone Number _____

Please share with us why you believe Montcrest would be the best school for your child.

FAMILY INFORMATION

Parent/Guardian 1

Parent/Guardian 2

Relationship to Student _____

Title Mr. Mrs. Ms. Dr.

Mr. Mrs. Ms. Dr.

Last Name _____

First Name _____

Home Address _____

City _____

Province & Postal Code _____

Telephone (home) _____

Telephone (cell) _____

Telephone (business) _____

Company/Employer _____

Occupation/Title _____

Preferred Email _____

Applicant lives with

Both Parents/Guardians Parent/Guardian 1 Parent/Guardian 2

Correspondence should be sent to

Both Parents/Guardians Parent/Guardian 1 Parent/Guardian 2

APPLICANT'S SIBLINGS

Name _____ Age ____ Grade ____ Current School _____

Name _____ Age ____ Grade ____ Current School _____

Name _____ Age ____ Grade ____ Current School _____

Please list the name(s) and relationship of any family members or friends who attend or have attended Montcrest.

APPLICANT'S INTERESTS (If necessary, please attach an extra sheet.)

1. Help us to know your child better. What activities and interests does s/he enjoy?

2. How would you describe your child? Tell us something about their characteristics, traits, and personality.

3. Montcrest strives to meet the educational and social/emotional needs of each of our students. In order to help us best assess and support your child for a Montcrest education, please check any of the following that apply to your child:

My child is/was:

- Identified as gifted (attach a copy of the assessment document)
- Using an external tutor
- Learning with an IEP (Individualized Education Plan) (attach a copy of the IEP)
- Utilizing his/her school's learning resource centre
- Participating in an enrichment program
- The subject of an educational assessment (attach a copy of the most recent of any such assessments)
- The subject of a psychological assessment (attach a copy of the most recent of any such assessments)
- Seeing a professional counsellor

Please provide details below and attach any relevant documentation and/or contact information of other professionals familiar with your child.

4. Does your child have any medical conditions of which we should be aware? Yes No

5. Is there any other information you wish the Admissions team to consider?

GRANDPARENT'S INFORMATION

Our school community consists of students, parents, staff, alumni, grandparents, and friends of Montcrest. Throughout the school year there are many opportunities for grandparents to learn about and become engaged in their grandchildren's Montcrest experience (e.g. attend a holiday concert, play together at Fall Fair, help launch a kite at Kite Day). Grandparents have shown that they have the time, interest, and ability to have a positive impact on the Montcrest community. To assist us in communicating with grandparents about Montcrest activities and opportunities, we invite you to complete the information below.

Name _____	Email _____
Name _____	Email _____
Name _____	Email _____

How did you learn about us? (Please check any that apply.)

- | | | |
|---|---|--|
| <input type="checkbox"/> Montcrest Family | <input type="checkbox"/> Montcrest Faculty Member | <input type="checkbox"/> Montcrest Alumni |
| <input type="checkbox"/> Friend/Relative | <input type="checkbox"/> Montcrest Website | <input type="checkbox"/> Educational Consultant |
| <input type="checkbox"/> School Fair | <input type="checkbox"/> Print Ads | <input type="checkbox"/> Street Banners / Transit Shelters |
| <input type="checkbox"/> Other _____ | | |

Have you attended a Montcrest Open House? Yes No If yes, when? _____

Have you had a personal tour? Yes No If yes, when? _____

It is understandable that parents apply to and consider other schools. If so, please list any other schools to which you have applied or are considering an application for this year:

APPLICATION CHECKLIST

Please send in your completed application and all required documents to Montcrest School. Completed applications can be mailed to the address at the bottom of the application, delivered, or sent electronically to admissions@montcrest.ca.

- Application form completed
- Non-refundable application fee of \$150 Cheque or Online Payment
- Small photograph of applicant
- Copies of the applicant's end of school reports for last two years and most recent report cards
- Copies of any Educational and/or Psychological-Educational Assessments, including OT and SLP assessments
- Copy of IEP issued this or last academic year

For information about bursaries, please visit the Admissions section of our website.

This application ensures that your child will be considered for entry but does not guarantee acceptance.

All information on this form or submitted in the application process is private and confidential. The undersigned gives Montcrest permission to request and receive confidential information regarding the applicant and to retain such information in the applicant's file. If the candidate is admitted to Montcrest School, we undertake jointly and severally to be responsible for all financial obligations incurred by the applicant at Montcrest School.

I understand that withholding or misrepresenting information or not including documents requested in this application process may jeopardize admission or enrolment at Montcrest School.

My signature below indicates that all the information contained in the application is correct, complete, and honestly presented and that all documents requested are included with the application.

Parent/Guardian Signature _____ Date _____

Parent/Guardian Signature _____ Date _____



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Tel 416 469 2008 Fax 416 469 0934
admissions@montcrest.ca www.montcrest.on.ca

FOR OFFICE USE ONLY

Received _____ Emailed/Called _____ Entered _____ Date of Visit/Test _____