



HAMILTON DISTRICT CHRISTIAN HIGH APPLICATION PROCESS | INTERNATIONAL STUDENTS

Thank you for your interest in Hamilton District Christian High School.

The following documents must be completed and submitted by all new applicants for consideration for admission:

CHECKLIST

<input type="checkbox"/>	APPLICATION FORM
<input type="checkbox"/>	PERSONAL BIOGRAPHY FORM
<input type="checkbox"/>	CHARACTER REFERENCE FORM (TO BE COMPLETED BY AN ADULT, NON-FAMILY MEMBER WITH PREFERENCE FOR SENIOR TEACHER OR MOST RECENT PRINCIPAL)
<input type="checkbox"/>	LIABILITY RELEASE FORM
<input type="checkbox"/>	SIGNED REFUND POLICY
<input type="checkbox"/>	HOME STAY APPLICATION
<input type="checkbox"/>	COPY OF PASSPORT
<input type="checkbox"/>	COPY OF IMMUNIZATION RECORDS
<input type="checkbox"/>	COPIES OF SCHOOL RECORDS FROM THE PAST TWO YEAR, OFFICIALLY TRANSLATED. (A PHOTOCOPY, FAX OR SCAN OF THE DOCUMENT IS SUFFICIENT WITH THE APPLICATION; ORIGINAL, OFFICIAL COPIES ARE REQUIRED WHEN THE STUDENT ARRIVES AT HDCH.)

SPECIAL NOTES:

Once applications have been processed, successful applicants will be contacted by the school, which will forward pre-acceptance letters.

- When an application has been approved, students will make a deposit of \$5,000 to the school's account.
- Upon receipt of the deposit, the school will courier original letters of acceptance and guardianship to the Agent's admissions office in Beijing. The Agent will forward copies to the student for obtaining their student visas.
- Once a student receives their visa, they will pay the remaining balance of their fee at least four weeks before their arrival on campus. At this time, a home stay will be arranged.

When the student arrives at HDCH, he or she must bring the passport and the original translations of two years of school records. At that time, student services will do an academic assessment and finalize a program of study.

QUESTIONS:

If you have any questions related to tuition, method of payment or payment options, our Director of Finance, Sherry Osinga, would love to talk with you! Contact her at 905.648.6655 x111 or sosinga@hdch.org.



HAMILTON DISTRICT CHRISTIAN HIGH APPLICATION FORM ~ INTERNATIONAL STUDENTS

Hamilton District Christian High is committed to protecting your privacy and understands the importance of protecting personal information. Hamilton District Christian High will protect your personal information by security safeguards appropriate to the sensitivity of the information. This information may be shared internally to benefit student instruction.

An information file called the Ontario Student Record—containing report cards, an up-to-date transcript, and other material pertinent to the student’s academic achievements—is maintained for each student enrolled in accordance with Ontario Ministry of Education guidelines.

STUDENT INFORMATION

SURNAME:	GIVEN NAMES:		
NAME COMMONLY USED:	BIRTH DATE (MM/DD/YYYY):		
GENDER:	TARGET ENTRY GRADE:		
HOME PHONE:	CURRENT SCHOOL:		
HOME ADDRESS:			
CITY / TOWN:	POSTAL CODE / ZIP CODE:		
PROVINCE OF BIRTH:	FIRST LANGUAGE (IF NOT ENGLISH):		
COUNTRY OF BIRTH (IF NOT CANADA):	ENTRY DATE TO CANADA (MM/DD/YYYY):		
STATUS IN CANADA:	<input type="checkbox"/> CITIZEN	<input type="checkbox"/> NATIVE ANCESTRY	<input type="checkbox"/> PERMANENT RESIDENT
	<input type="checkbox"/> STUDENT VISA	<input type="checkbox"/> OTHER VISA	<input type="checkbox"/> REFUGEE

PARENT / GUARDIAN#1 INFORMATION

FULL NAME:
ADDRESS (IF DIFFERENT FROM STUDENT'S):
HOME PHONE:
BUSINESS PHONE:
CELL PHONE:
EMAIL:

PARENT / GUARDIAN#2 INFORMATION

FULL NAME:
ADDRESS (IF DIFFERENT FROM STUDENT'S):
HOME PHONE:
BUSINESS PHONE:
CELL PHONE:
EMAIL:

FAMILY DYNAMICS

APPLICANT LIVES WITH: BOTH PARENTS
 PARENT / GUARDIAN #1 PRIMARILY PART-TIME
 PARENT / GUARDIAN #2 PRIMARILY PART-TIME

Please indicate if there are any special family arrangements of which the school should be made aware (including progress reports and academic information):

FINANCIAL RESPONSIBILITY:
If tuition and fees are not the sole responsibility of parent(s)/guardian(s), please note individual(s) name, relationship to applicant and address.

HEALTH INFORMATION

FAMILY PHYSICIAN:
PHONE:
CANADIAN HEALTH CARD NUMBER & LETTERS:
IDENTIFIED MEDICAL CONCERNS (INCLUDING ALLERGIES):

EMERGENCY CONTACT NAME (AFTER CONTACT TO GUARDIANS):
RELATIONSHIP:
PHONE:

ATHLETIC CONSENT

I give permission for my child to attend tryouts for any of the extracurricular sports teams.
 YES NO

CHURCH AFFILIATION

NAME OF CHURCH:
DENOMINATION:
PASTOR/PRIEST:
YOUTH DIRECTOR:

EDUCATIONAL CONCERNS

My child has learning exceptionalities (i.e. an Individual Education Plan, Student Learning Profile, giftedness, Psychological or Education Assessment, extra academic support).
 YES NO

COMMENTS:

MEDIA CONSENT

The Privacy Act (PIPEDA) requires us to have written consent before we can use photos publicly. By giving this consent, you are permitting photographs or videos of your child to be viewed by anyone who views the Hamilton District Christian High website, social media accounts, or reads HDCH literature, and that if consent were withheld, the publication would not occur.
 WE CONSENT WE DO NOT CONSENT

PARENT / GUARDIAN #1 SIGNATURE

DATE

PARENT / GUARDIAN #2 SIGNATURE

DATE

GENERAL INFORMATION

SIBLINGS:

List names and ages of siblings not currently attending Hamilton District Christian High:

STUDENT NAME (S)	AGE

ALUMNI:

List relatives who have attended Hamilton District Christian High in the past or may be attending currently (please include maiden names where applicable):

NAME (S)

In order to refine our admission process, please indicate what prompted you to make your initial inquiry:

- CURRENT HDCH FAMILY
- HDCH ALUMNI
- FRIEND / ASSOCIATE REFERRAL
- AGENT
- ADVERTISING
- SOCIAL MEDIA
- INTERNET (INCLUDING SEARCHES)
- CURRENT SCHOOL
- CHURCH / YOUTH GROUP
- OTHER (PLEASE INDICATE)

STUDENT APPLICANT: WHY WOULD YOU LIKE TO ATTEND HDCH?

PARENT / GUARDIAN:

WHAT CHARACTERISTICS OF OUR SCHOOL INTEREST YOU, AND WHY DO YOU BELIEVE OUR SCHOOL IS A GOOD MATCH FOR YOUR CHILD?

OUR COMMITMENT

We believe in God the Father, God the Son, and God the Holy Spirit and confess that our faith must find expression in all our thoughts and actions. We dedicate our work to the pursuit of character development through learning, recognizing that true transformation can be found only in Jesus Christ.

We regard every student as sacred before God, who calls every one of them to obey His Law, and out of concern for their development as citizens of His Kingdom we dedicate our efforts toward a wholesome growth of their God-given potential. It is important that we deal justly with all students and make professional judgments regarding their academic, physical, and emotional characteristics as required.

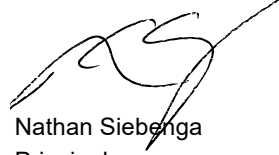
We acknowledge the God-given authority of the parents concerning the student's education. We consider it a privilege to teach the students according to a plan of learning for which the religious direction is determined and accepted mutually by the parents and by the staff.

We promise to establish a relationship of mutual confidence with the parents and the students.

We believe that the Christian School is a cultural expression of the Christian community's faith commitment, and that it is our task as educators to make plain to students the relevance of God's Word in life's total experience.

We are committed to the growth and development of the Christian community, and desire a harmonious and communal submission in all areas of life to the power of God's Word. For this purpose, we shall seek guidance and justice in our relations with the students, the parents, the Board of the school and all others who support Christ-centred education.

On behalf of the HDCH Staff,



Nathan Siebenga
Principal

PARENT'S COMMITMENT

I agree that my child will be educated in a manner consistent with the beliefs and objectives of Hamilton District Christian High, which are summarized in the statement above: the Mission, the Vision, and the Foundational Statement.

I agree that my child will participate in and attend all compulsory courses and devotional activities as outlined in the Course Calendar.

I agree to co-operate with HDCH staff in appropriate program planning for my child. This includes consent for my child to participate in all educational excursions or trips conducted as part of the educational program.

I agree that upon enrolling my child, I will support my child in participating fully as part of HDCH's learning community.

I understand that Hamilton District Christian High staff will work to restore relationships and bring resolution when community is broken.

I acknowledge that the school reserves the right to enroll or de-enroll any student and/or family at any time during the school year, as it sees fit and without prior notice, for the well-being of the school community.

PARENT / GUARDIAN #1 SIGNATURE

DATE

PARENT / GUARDIAN #2 SIGNATURE

DATE

STUDENT'S COMMITMENT

I understand that at Hamilton District Christian High I will be educated in a manner consistent with its beliefs and objectives, which are summarized in the Mission, Vision, and Foundational Statement.

I agree to faithfully carry out my role as a student by participating in the life of this community, respecting all members of the community as image-bearers of God, and fully participating in the learning going on in my courses.

STUDENT SIGNATURE

DATE



HAMILTON DISTRICT CHRISTIAN HIGH PERSONAL BIOGRAPHY

STUDENT'S NAME:

TELL US ABOUT YOURSELF AND YOUR FAMILY.

TELL US ABOUT YOUR CHURCH AND FAITH LIFE.

TELL US WHY YOU ARE APPLYING TO HDCH.

TELL US WHAT YOU EXPECT FROM OUR SCHOOL AND YOUR TIME HERE.

SIGNATURE

STUDENT SIGNATURE

DATE



HAMILTON DISTRICT CHRISTIAN HIGH CHARACTER REFERENCE

Dear referee,

Hamilton District Christian High has the following mission: Cultivating character through learning for a life of service to God. The student who has presented you with this form is applying for enrollment at our school. We would like to get to know him/her better. Please answer the questions below.

STUDENT'S NAME: _____

REFERENCE COMPLETED BY: _____

RELATIONSHIP TO STUDENT: _____

HOW LONG HAVE YOU KNOWN THE STUDENT AND /OR THE STUDENT'S FAMILY? _____

TELL US ABOUT THE STUDENT AND HIS/HER FAMILY

DESCRIBE THE PERSONAL AND/OR ACADEMIC STRENGTHS THAT YOU BELIEVE THIS STUDENT WOULD BRING TO BOTH SCHOOLWORK AND OUR COMMUNITY AT HDCH.

DESCRIBE THE PERSONAL AND/OR ACADEMIC CHARACTERISTICS THAT MAY BE CHALLENGES FOR THIS STUDENT TO BE A PART OF OUR LEARNING COMMUNITY.

SIGNATURE

REFeree SIGNATURE

DATE



HAMILTON DISTRICT CHRISTIAN HIGH LIABILITY RELEASE FORM

STUDENT INFORMATION

STUDENT NAME: _____

We hereby release Hamilton District Christian High (HDCH) and all of its employees and host families from all liability, damages or claims which were incurred during the time of our child participating in their school program.

We understand that, on occasion, students may choose to be transported by vehicles not operated by the school and we hereby release the school and all of its employees and host families from all associated liability.

We understand that, on occasion, students may be injured in daily activities or while playing sports and we hereby release the school and all of its employees and host families from all associated liability. We as parents will be responsible for all charges associated from illness and or accidents not covered by the health insurance policy.

We understand that the participant will be subject to the authorities and teachers of HDCH and that he or she will have to follow the rules given by the family with whom he or she may live. We understand that our child must comply with all local and state laws. We understand that the student and family must comply with all policies regarding the HDCH International Student Program. We also understand that the school reserves the right to terminate participation in the homestay program of any student whose conduct may be considered detrimental or incompatible with the interest and security of the program. If this decision is ever taken, the student and his or her parents, or legal guardians, will be formally warned and have no right to any refunds. We are also financial responsible for any damages or charges incurred due to our child's negligence in not complying with the above listed rules, laws and or regulations.

The student agrees to accept and uphold the standards of conduct set by HDCH, and by the family or families with whom he or she may live, for the duration of the program. He or she agrees to maintain friendly and respectful relations with his or her teachers and classmates and, especially, with all the members of the family with whom he or she may be living. He or she agrees to accept the rules of conduct imposed by said family, to participate in the family life as much as possible, to try his or her best to adjust to the normal system of family life, and to treat all the members of the family with respect.

RELEASE SIGNATURES

STUDENT SIGNATURE

DATE

PARENT / GUARDIAN SIGNATURE

DATE

WTINESS (LOCAL SUB-AGENT)

DATE

WITNESS ADDRESS / PHONE NUMBER



HAMILTON DISTRICT CHRISTIAN HIGH REFUND POLICY

STUDENT INFORMATION

STUDENT NAME: _____

STUDY PERMIT RELATED WITHDRAWALS

Full refund (less \$400.00 to cover application costs) only if there is a written request for the refund along with a copy of the rejection letter from Citizenship Immigration Canada. This must be received within one month of the refusal.

NON-STUDY PERMIT RELATED WITHDRAWALS

If a student withdraws prior to the first month of study, HDCH will retain \$5,000.00 of the tuition fees.

(Note: Notice of withdrawal must be given in writing before the first month of study.)

- The tuition is ordinarily non-refundable in the event that a student withdraws at any time during the year.
- There is no refund if a student is dismissed from school due to a violation of school rules (see student handbook), a violation of an academic or behavioural contract, or if vital information has been withheld in the application.
- For returning international students:
 - Re-registration and tuition fees must be paid by the specified date to guarantee a place for students for the following year; failure to do so may result in losing placement priorities.
 - If a returning student withdraws before school begins, HDCH will retain the tuition deposit.
 - If full tuition payment is not received by due date, the student will be dismissed from school.

CHANGE OF STATUS

There is no refund to students whose status changes during the school year. If a student is enrolled as an international student, he/she remains an international student for the school year.

I HAVE READ THE ABOVE POLICY, UNDERSTAND ITS CONTENT AND ACCEPT ITS CONDITIONS.

PARENT / GUARDIAN SIGNATURE

DATE



HAMILTON DISTRICT CHRISTIAN HIGH HOMESTAY APPLICATION

HDCH is committed to ensuring a safe and hospitable homestay for all our international students. All our homestay families are carefully vetted.

STUDENT INFORMATION

SURNAME: _____ GIVEN NAMES: _____

GENDER: _____ BIRTH DATE (MM/DD/YYYY): _____

MAILING ADDRESS: _____

CITY / TOWN: _____ POSTAL CODE / ZIP CODE: _____

EMAIL: _____ FAX: _____

TELEPHONE (DAY): _____ TELEPHONE (EVENING): _____

LANGUAGES SPOKEN: _____ STUDENT SKYPE ID: _____

ARRIVAL DATE: _____ TIME: _____ FLIGHT #: _____

EMERGENCY CONTACT INFORMATION (PARENT OF AGENT)

Contact Person (with English speaking skills) to notify in case of an emergency:

SURNAME: _____ GIVEN NAMES: _____

RELATIONSHIP TO STUDENT: _____

TELEPHONE (DAY): _____ TELEPHONE (EVENING): _____

FAX: _____ EMAIL: _____

PARENT AND/OR GUARDIAN PLEASE INITIAL NEXT TO EACH POINT BELOW

I understand that any issues related to the homestay should be brought forward to the Guardian as soon as possible so it may be satisfactorily resolved. _____ | _____

I agree that for the duration of my child's enrollment at HDCH my child will reside with a homestay selected by the school regardless if my child has reached the age of majority (18 years of age). _____ | _____

I also acknowledge that my child is required to uphold the rules of the Homestay Student Agreement which will be reviewed and signed off on by the homestay family and my child. This agreement includes agreed to curfew times, guest policy, and so forth. _____ | _____

TELL US ABOUT YOURSELF

Proficiency in English: (This is a personal assessment of your proficiency in English)

	SPEAKING	LISTENING	READING	WRITING
BEGINNER				
INTERMEDIATE				
ADVANCED				

GENERAL INFORMATION ABOUT YOU

HOBBIES I LIKE:

OTHER COUNTRIES I HAVE VISITED

SOME THINGS I REALLY LIKE:

SOME THINGS I DISLIKE:

WILL YOU BRING YOUR LAPTOP COMPUTER NO YES

Character Traits (Check all that apply):

- | | | |
|-------------------------------------|--------------------------------------|-----------------------------------|
| <input type="checkbox"/> SOCIABLE | <input type="checkbox"/> SENSITIVE | <input type="checkbox"/> HUMOROUS |
| <input type="checkbox"/> ACTIVE | <input type="checkbox"/> COOPERATIVE | <input type="checkbox"/> OUTGOING |
| <input type="checkbox"/> EASY GOING | <input type="checkbox"/> ADAPTS | <input type="checkbox"/> CURIOUS |
| <input type="checkbox"/> POSITIVE | <input type="checkbox"/> QUIET | <input type="checkbox"/> SHY |
| <input type="checkbox"/> TALKATIVE | <input type="checkbox"/> OTHER | |

YOUR GENERAL HEALTH

HAVE YOU ANY MEDICAL CONDITIONS THAT WE SHOULD BE MADE OF AWARE OF? NO YES

IF YES, PLEASE EXPLAIN:

ARE YOU TAKING ANY MEDICATIONS FOR THIS CONDITION? NO YES

DO YOU SMOKE? NO YES

WOULD YOU LIKE TO LIVE IN A HOME WITH PETS? NO YES

IF NO, PLEASE EXPLAIN:

LIST ANY INFORMATION ABOUT YOURSELF THAT YOU FEEL WOULD ASSIST IN SELECTING THE MOST APPROPRIATE AND SATISFACTORY HOMESTAY SELECTION FOR YOU (INCLUDE SPECIAL NEEDS, ALLERGIES, ETC.)
