

Application Check List

Application	Form
-------------	------

- Birth Certificate
- Immunization Records
- Learning Updates
- Legal Residency of Parent
- Application Fee paid by e-transfer accountant@mariamont.ca

Please Confirm the following:

□ I have sent the *Teacher Reference Form* to my child's teacher or daycare provider if applicable

If applicable:

- □ I have included my child's most current Individualized Education Plan
- □ I have attached their complete and current Psycho-Educational Assessment
- □ I have included any paperwork detailing learning supports (ex. Speech Therapy) or diagnosis (ex. ADHD)

If not applicable:

Please check all that apply and sign below:

- ☐ My child <u>has not</u> received a Special Education Designation
- ☐ My child <u>has not</u> received Learning Assistance
- My child has not had a Psycho-Educational Assessment
- My child is not in the process of/or waiting to receive a Psycho-Education Assessment

Signature: _____

*Please note, applications will not be reviewed until the above checklist is complete

What influenced you decision to apply? (Check all that apply)							
	□Referral	□Virtual Tour	□Open House	□Website	□Social Media	□Other	
If Other/Referral please specify:							