



# e.p.i.c. School Application for Admission

Part A - page 1

This application is for admission to:

Pre-Kindergarten

Jr. Kindergarten

Sr. Kindergarten

Preference :  Morning (9:00 - 11:45 am)  Afternoon (1:00 - 3:45 pm)

## Candidate Information:

<p>Child's Surname, Given Name _____</p> <p>Home Address _____</p> <p>Telephone _____</p> <p>Cell Phone _____</p> <p>Email _____</p>	<p>Date of birth (dd/mm/yy) _____</p> <p style="text-align: center;">Please attach a recent photo of your child here</p>
<p>Persons living with your child (nanny, grandparents etc.) _____</p>	<p>Languages spoken at home _____</p>
<p>Siblings - Names and ages</p> <p>1. _____ 3. _____</p> <p>2. _____ 4. _____</p>	
<p>Mother's Surname, Given Name _____</p> <p>Work Address _____ (if different from above)</p> <p>Work Telephone _____ (if different from above)</p> <p>Cell Phone _____</p> <p>Email _____</p>	<p>Father's Surname, Given Name _____</p> <p>Work Address _____ (if different from above)</p> <p>Telephone _____ (if different from above)</p> <p>Cell Phone _____</p> <p>Email _____</p>
<p>For Office Use Only</p> <p>Placement _____ A.M. _____ P.M.</p> <p>Start Date _____</p> <p>End Date _____</p>	

**e.p.i.c. School Application Form - Part A - page 2**

**Emergency Information - Persons to be contacted if a parent cannot be reached**

Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Relationship to Child \_\_\_\_\_

Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Relationship to Child \_\_\_\_\_

Name of person(s) we are permitted to release your child to, and their relationship to your child

1. Name \_\_\_\_\_ Relationship \_\_\_\_\_

2. Name \_\_\_\_\_ Relationship \_\_\_\_\_

**Medical Information**

Child's Family Physician \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_

Does your child have any allergies? Yes \_\_\_\_\_ No \_\_\_\_\_  
Describe: \_\_\_\_\_  
\_\_\_\_\_

Does your child have any special dietary requirements or medical condition we should know about? If yes, please explain.  
\_\_\_\_\_  
\_\_\_\_\_

**IMPORTANT Please attach a copy of your child's Immunization Record**

Signature of Parent \_\_\_\_\_ Date \_\_\_\_\_

# e.p.i.c. School Application Form - Part B - page 1

## Please Help Us To Know your Child Better

What kind of educational experiences has your child already had?

(Please enclose any copies of any reports you may have)

Does your child enjoy listening to stories? List his or her favourites.

What best describes your child.

Usually chooses:

1. Large group activities \_\_\_\_\_ 2. Small group \_\_\_\_\_ 3. prefers to be alone \_\_\_\_\_

Usually takes the role of:

1. Leader \_\_\_\_\_ 2. Follower \_\_\_\_\_ 3. Varies \_\_\_\_\_

Was your child born near the due date? \_\_\_\_\_

Were there any complications? \_\_\_\_\_

Has your child had recurrent ear infections? \_\_\_\_\_

Has your child had any communicable diseases? E.g. chicken pox? \_\_\_\_\_

Does your child have any particular fears or concerns? \_\_\_\_\_

At what age did your child begin sitting? \_\_\_\_\_ walking? \_\_\_\_\_

At what age did your child begin using single words or word approximations? \_\_\_\_\_

At what age did your child start putting two words together i.e. "Daddy car"? \_\_\_\_\_

At what age did your child start using 3+ word sentences? \_\_\_\_\_

Has your child ever been recommended and/or seen a speech and language pathologist?

Has your child ever had a developmental assessment? \_\_\_\_\_

(If so, please attach a copy of the report)

Please tell us about your child. There is some space on the back. Feel free to attach a page.

## e.p.i.c. School Application Form - Part B - page 2

More about your child.

Please complete the following admissions survey.

How did you hear of e.p.i.c. School?

\_\_\_\_\_ website

\_\_\_\_\_ ad in a local paper

\_\_\_\_\_ sign or poster

\_\_\_\_\_ friend \_\_\_\_\_

\_\_\_\_\_ other \_\_\_\_\_

Does your child have siblings at another school? \_\_\_\_\_ Which school? \_\_\_\_\_

What other schools are you considering?

Have you been to one of our Open Houses? \_\_\_\_\_ If so, when? \_\_\_\_\_

Thank you for your application. All information will be kept confidential. Please return both Part A and Part B together with a \$200.00 application fee to

e.p.i.c. School  
111 Manor Road E  
Toronto, ON  
M4S 1R4

We strive to place all the children in the programme and class of choice but it is not always possible due to limited spaces.