

# Application Booklet

*For Junior Kindergarten Students*



**QUEEN MARGARET'S SCHOOL**  
UNIVERSITY PREPARATORY HIGH SCHOOL FOR GIRLS





# QUEEN MARGARET'S SCHOOL

## UNIVERSITY PREPARATORY HIGH SCHOOL FOR GIRLS



## Admissions Process

### Welcome!

Choosing the right school for your child is a challenging task. A school forms their attitude to learning, their skill set, their foundation of knowledge, and their artistic and athletic abilities that enrich their lives and define them as individuals. The right school provides a good circle of friends that will follow them through life, and cultivates a moral compass to help guide their way. We want to help you with this process by providing the following instructions regarding application to Queen Margaret's School.

Please remember that space in some classes may be limited so early application is recommended. Don't be shy about applying. An application is an expression of interest, not a commitment. Upon acceptance, your child's enrollment will be confirmed with the school's receipt of your Registration agreement and deposit.

*We hope to see your family with us in September.*

### Visit our Campus

To set up a time to see us, call the Admissions Office at **(250) 746-4185**.

Courtney Gillan, Executive Director, Admissions & Advancement  
Rebecca McKay, Assistant Director of Admissions

Shannon Peck, Admissions Coordinator  
Tamara Unrau, Admissions Assistant

### The Admissions office can be reached at:

Queen Margaret's School  
660 Brownsey Avenue,  
Duncan, British Columbia,  
Canada V9L 1C2

Tel: 1 250 746-4185

Fax: 1 250 746-4187

Web-site: [www.qms.bc.ca](http://www.qms.bc.ca)

Email: [admissions@qms.bc.ca](mailto:admissions@qms.bc.ca)

## Welcome to Queen Margaret's Junior Kindergarten-Preschool Program

We are excited about our Junior Kindergarten program and we are eager to meet you and your child. Our Teacher for our Junior Kindergarten Program is Stacy Paton. Stacy has been in the field of Early Childhood Education for more than fifteen years and has thoroughly enjoyed a variety of opportunities related to the preschool years.

For nine years, Stacy has also been a parent at Queen Margaret's School and knows firsthand that we have a supportive environment in which your children will grow and learn. We feel all children deserve the right to feel safe, secure, respected and valued as they meet and exceed their developmental goals. We are committed to providing your children with a nurturing and stimulating environment that will foster their own unique development as they prepare for kindergarten.

Below please find an outline of our students' day in the Junior Kindergarten Program.

### QMS Junior Kindergarten

- 8:15 Centre opens
- 8:15-9:15 All activity centres open for exploration/science, small and large motor activities and dramatic play area)
- 9:15-9:30 Clean up (children assist in putting the toys away)
- 9:30-9:45 Snack time (provided by QMS)
- 9:45-10:15 Group time (Calendar, alphabet, numbers, group discussions, theme related stories, music and movement)
- 10:15 -10:45 craft time
- 10:45 -11:30 Outside play
- 11:30 -12:00 Lunch (provided by QMS)
- 12:00 Pick up

### QMS Afternoon Care

- 12:00-12:30 Group time (stories, songs and games)
- 12:30- 2:00 Rest time /Quiet activities (puzzles, games, play dough)
- 2:15- 2:45 Snack time provided by QMS (children assist in the preparation and clean up)
- 2:45 Outside time (group games and activities)
- 5:00 Center closes

\*All times may vary as the program evolves

*Please note students must turn four years old by December 31, 2010 for entry into our 2010-2011 Jr. Kindergarten Program.*

## 2010-2011 Junior Kindergarten Program Information:

### Morning Junior Kindergarten-Preschool

Stacy Paton, Coordinator & Teacher, QMS Early Childhood Program

Time: 8:15am-12:00 Monday to Friday (lunch & snack included)

Cost: \$3860.00/year (September – June)

**Afternoon Daycare – (this is an optional program for families requiring afternoon daycare)**

Shireen Kazempour, Daycare Coordinator

Time: 12:00 until 5:00pm Monday to Friday (includes snack)

Cost: \$3315.00/year (September – June)

### Other Fees for Junior Kindergarten:

Application Fee: \$100

Campus Renewal Fee: \$150

*Fees can be paid monthly or in full annually.*

(QMS Preschool License # LSHP6QPUHG)

## Admissions Process

Complete and send the following documents to initiate the application process. Parents/Guardians should complete the attached application in full. Partial applications will delay the admissions process. Applications should be received by March 1 and are subject to available space.

- Applicant and Family Information Form – The parent/guardian completes this form including as much detail as possible for the school.
- Parent/Guardian Questionnaire - The parent/guardian completes this questionnaire providing as much detail as possible for the school.
- Non-Refundable Application and Assessment Fee – Payment of \$100.00 by cheque, credit card or money order due at time of application.
- Copy of the child's birth certificate, evidence of citizenship (passport or landed immigrant papers, if applicable) and small photograph.

## The Admissions Visit

Parents will be contacted to schedule an appointment to view the Junior Kindergarten Classroom and the Campus and meet with the Jr. Kindergarten Coordinator and Admissions Staff.

## Admissions Decisions

The Admissions Office will notify all applicants of its decision upon receipt of all application materials above. Acceptance is subject to available space. A place is reserved for your child after you return the Registration contract that accompanies the acceptance, along with the appropriate non-refundable deposit.



Please attach candidate's photo here

(required)

Please submit this application with:

- an up-to-date photograph
- \$100 non-refundable application fee
- copy of two most recent school reports
- copy of birth certificate or copy of passport (International Students) and
- copy of landed immigrant papers (if applicable)

Application Date:

Month/Day/Year

Entering Grade:

Beginning September:

Year

Day Student

Boarding Student (Gr 7 - 12 only)

Female

Male

Student Name:

Family Name

First Name

Middle

Preferred Name

Date of Birth:

Age in September:

Place of Birth:

Month

Day

Year

Home Language Spoken:

Province/State/Country

Is the student a Canadian Citizen?

Yes  No

If Yes, please provide proof of citizenship. If No, please state citizenship:

Is the student a Landed Immigrant?

Yes  No

If Yes, please provide proof of landed immigrant status for both applicant and parents.

Are the parents permanent residents of British Columbia?

Yes  No

If Yes, where?

Parent/Legal Guardian 1  Father  Mother  Legal Guardian

Parent/Legal Guardian 2  Father  Mother  Legal Guardian

Title:  Mr.  Mrs.  Dr.  Ms.  Other:

Title:  Mr.  Mrs.  Dr.  Ms.  Other:

Name:

Name:

Address:

First

Last

Address:

First

Last

Street

Street

City

Province/State

City

Province/State

Postal/Zip Code

Country

Postal/Zip Code

Country

Home Phone:

Home Phone:

Country/City/Area Codes

Country/City/Area Codes

Home Fax:

Home Fax:

Country/City/Area Codes

Country/City/Area Codes

Cell or Alternate Contact No.:

Cell or Alternate Contact No.:

Email:

Email:

Occupation/Position:

Occupation/Position:

Employer/Company Name:

Employer/Company Name:

Bus. Phone:

Fax:

Country/City/Area Codes

Country/City/Area Codes

Bus. Phone:

Fax:

Country/City/Area Codes

Country/City/Area Codes

Family Information (Please designate a primary mailing address for correspondence regarding this application).

Father  Mother  Both  Other:

Billing Information  Father  Mother  Both  Other:

Parent Information  Married  Divorced  Separated  Father Deceased  Mother Deceased  Other:

Student lives with  Both Parents  Father  Mother  Grandparent  Guardian  Other

Name

Name

Name

If parents are divorced or separated, who has legal custody of the applicant? (Copy of custodial documents are required if divorce or separation is involved).

School Enrollment Information (Please forward the school recommendation forms to your current school).

Current School:

Telephone:

Contact Teacher's Name:

Number of Years at School:

## Further Information

### a) Siblings

Name:	Age:	Grade:	School:
Name:	Age:	Grade:	School:
Name:	Age:	Grade:	School:

### b) Names of relatives or friends who are alumnae or current families of the school

Name:	Relationship	Years in Attendance
1.		
2.		

### c) How did you hear about QMS?

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## Authorization for Representation by an Agent or Consultant

If represented by an Agent/Consultant, please complete the following information.

### Agent/Consultant Contact Information:

Agent  Consultant  Friend  Relative  Other (please specify):

Name:	First	Last	Email:
Address:	Street		Occupation/Position:
	City	Province/State	Employer/Company Name:
Home Phone:	Postal/Zip Code	Country	Bus. Phone:
	Country/City/Area Codes		Bus. Fax:
			Country/City/Area Codes

## Admissions Agreement

I UNDERSTAND THE FOLLOWING:

a) This application does not guarantee acceptance to Queen Margaret's School;

b) This application, and enrollment if applicable, is subject to the parent/guardian providing full disclosure to the school or its agent of any academic, emotional and/or behaviour factors that would affect the student's academic progress, success in the classroom and/or life at the school. Misrepresentation or omission may result in denial of admission or termination of enrollment;

c) Upon acceptance, the student and her/his parents or guardians agree to comply with rules and policies of the school;

d) If provided below, I authorize Queen Margaret's School to apply the \$100 Application and Assessment Fee to my credit card;

e) The Head of the School reserves the right to request the withdrawal of any student.

CREDIT CARD (for \$100 Application & Assessment)      VISA      MASTER CARD      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / EXPIRY / \_\_\_\_\_ / \_\_\_\_\_

SIGNATURE OF PARENT/GUARDIAN      \_\_\_\_\_      DATE      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / (DAY/MONTH/YEAR)

SIGNATURE OF PARENT/GUARDIAN      \_\_\_\_\_      DATE      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / (DAY/MONTH/YEAR)

WE ARE DELIGHTED TO CONSIDER YOUR CHILD AND SUPPORT IN THE APPLICATION PROCESS.      PLEASE NOTE: It is mandatory to have signatures of both parents, or both legal guardians

QUESTIONS? Contact Chad Holtum, Deputy Head, Operations, or Rebecca McKay, Asst. Director of Admissions at (250) 746.4185, fax (250) 746.4187. Reach us through email at admissions@qms.bc.ca or our website at www.qms.bc.ca.



Student Name:

Family Name First Name Middle Preferred Name

Applying to Grade: Beginning September as a Student at Queen Margaret's School. Year

Name of Person Completing this Form: Relationship:

Dear Parent/Guardian:

Changing schools can be challenging for a child of any age. To facilitate the admissions process and transition to our school, please take the time to provide us with the following details about the student applying to Queen Maragret's. It is imperative that we understand your child's academic, physical, social and emotional needs - to help them to settle into a new school and support them in their progress. Failure to disclose relevant information about this child may result in denial of admission or enrollment.

1. What are you looking for in a new school for your child? [Blank lines for response]

2. What strengths does your child bring that will help them to be successful at Queen Margaret's School? What challenges do you think they will face? [Blank lines for response]

3. Are there any educational, physical, or emotional issues that might affect your child's success in or out of the classroom? [Blank lines for response]

4. Has your child ever received any academic or psychological evaluations or assessments outside of their school? [ ] No [ ] Yes If yes please provide details and attach a copy of their testing results. [Blank lines for response]

5. Has your child received/is your child receiving academic tutoring? [ ] No [ ] Yes Subject area(s): [Blank line] May we contact the tutor for details of material covered? [ ] No [ ] Yes Tutor's name: [Blank line]

Contact Information:

6. Has the child/is the child presently receiving any Academic/Social/Family/Emotional Counselling? [ ] No [ ] Yes, Purpose: [Blank line]

7. Does your child want to attend Queen Margaret's School? [ ] No [ ] Yes

8. Why is the child leaving their present school? [Blank lines for response]

SIGNATURE OF PARENT/GUARDIAN DATE \_\_\_\_/\_\_\_\_/\_\_\_\_ (DAY/MONTH/YEAR)

THANK YOU FOR YOUR CANDID & CONFIDENTIAL COMMENTS. PLEASE HAVE YOUR CHILD COMPLETE THE STUDENT QUESTIONNAIRE AND RETURN THIS COMPLETED FORM WITH YOUR APPLICATION FORM.



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