



# REQUEST FOR APPLICATION FORM

**St. Anthony of Padua School**  
 1370 W. 73rd Ave., Vancouver, BC V6P 3E8  
 Phone 604 261 4043 Fax 604 261 4036  
 Email: [admissions@stanthonyofpaduaschool.ca](mailto:admissions@stanthonyofpaduaschool.ca)  
 Website [www.stanthonyofpaduaschool.ca](http://www.stanthonyofpaduaschool.ca)  
 (If emailing forms, please put "Waiting List" in the Subject Line)

**PLEASE PRINT CLEARLY**

**APPLICATION #** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (OFFICE USE ONLY)  
 YEAR MO DD

**SURNAME:** \_\_\_\_\_

**NAME OF MOTHER:** \_\_\_\_\_ **FATHER:** \_\_\_\_\_ **MARITAL STATUS:** \_\_\_\_\_

**COMPLETE ADDRESS:** \_\_\_\_\_

**HOME PHONE:** \_\_\_\_\_ **WORK # Mother** \_\_\_\_\_ **CELL# Mother** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_ **Father** \_\_\_\_\_ **Father** \_\_\_\_\_

**ST. ANTHONY OF PADUA PARISH - ENVELOPE#** \_\_\_\_\_

**NOT CATHOLIC**

**OTHER PARISH:** \_\_\_\_\_ - **ENVELOPE #** \_\_\_\_\_

Name of Child	Gender M / F	Birth Date mo/dd/year	Applying For		Name of Catholic Church Baptized	Yes	Yes	Name of School presently attending
			Grade	School Year		No	No	

*What Faith Denomination?*

**EXTRA SERVICES REQUIRED BY YOUR CHILD/REN:**

**ESL** (LANGUAGE SPOKEN AT HOME)

**SPECIAL NEEDS** (i.e. VISION, HEARING, PHYSICAL DISABILITIES)

NAME OF CHILD

EXPLAIN NEEDS

**PLEASE READ CAREFULLY AND SIGN BELOW:**

- a.) I have been informed and understand that priority for admission to St. Anthony of Padua School is given to families who:
  - i) are practicing Catholics,
  - ii) are registered in the parish,
  - iii) attend Sunday Mass regularly, and
  - iv) support the parish by using their envelopes every Sunday.
- b.) I also understand that the **Request for Application Form** is valid for **one year only**, unless I notify the school by the end of February prior to the beginning of a new school year. Failure to renew this application or update information may result in my application being removed from the Waiting List.
- c.) I give consent for St. Anthony of Padua School to collect personal information that may include student identification information, birth certificate, parents work number, academic records, and information from the school and/or parish that my child and/or family attends or has attended. *This information is required in order to assist the school in making decisions regarding interviews and acceptance of new families depending on available space.*

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_