



New Kindergarten Student Application Checklist

Paper Package of Application Documents

Applies to Kindergarten students registering for 2024-2025 school year

REQUIRED DOCUMENTATION:

Submit a copy of one of the following for Canadian citizens:

(upload on electronic application OR attach a copy to this package)

- Copy of Canadian Birth Certificate or
- Copy of Canadian Citizenship Certificate

OR

Submit a copy of one of the following for Non-Canadian citizens:

(upload on electronic application OR attach a copy to this package)

- Copy of Valid Permanent Residency Card or
- Copy of Student's Study Permit* together with copy of one Parent's Work / Study Permit

**Study Permit must be valid for full length of school year*

- Character Reference Form
- Financial Information Form together with \$150 application fee (per student)

OPTIONAL DOCUMENTATION: (Fill out and submit only if applicable)

- Severe Allergy / Health Concern Alert Form
- Parent School Bus Agreement Form
- Student School Bus Agreement Form
- Volunteer Registration Form

CHINOOK WINDS ADVENTIST ACADEMY

10101 2nd Avenue S.W., Calgary, AB T3B 5T2

Phone: (403) 286-5686, Fax: (403) 247-1623

Email: reception@cwaa.net



CHARACTER REFERENCE FORM

This form is to be completed by a Pastor, Youth Leader, Children's Minister, Sabbath School Leader/Teacher or a christian adult actively involved in the child's life. Please assist us by completing this form and returning it directly to the school by scanning and emailing to reception@cwaa.net or fax to (403) 247-1623.

Name of Student Applying: _____

Your Name: _____

Title: _____

Church/Organization: _____

Phone: _____

The above student has applied for acceptance at our school. It is our desire to develop a supportive relationship between home, school and church. New families are not interviewed until this form is received. CWAA will keep the contents of this questionnaire confidential. Thank you for taking the time to fill this form out. Your input is very valuable.

1. How long have you known the student? _____
2. What is your relationship with this student? _____
3. How often are you in contact with the student?
 Weekly Monthly Occasionally Seldom
4. Please place a check in one box in each category below:

Participation	Self-Control	Integrity	Friendships
<input type="checkbox"/> High level of participation in activities	<input type="checkbox"/> Maintains a high level of self-control during activities	<input type="checkbox"/> Consistently responsible and honest – owns own behavior and actions	<input type="checkbox"/> Gets along extremely well with other peers
<input type="checkbox"/> Consistently active participator in activities	<input type="checkbox"/> Overall a good level of self-control during activities	<input type="checkbox"/> Generally responsible and honest - owns behavior and actions.	<input type="checkbox"/> Liked by others and overall gets along well with peers
<input type="checkbox"/> Inconsistent participator	<input type="checkbox"/> Blurts out/yells; uses inappropriate language	<input type="checkbox"/> Concern over honesty - will not own behavior or actions.	<input type="checkbox"/> Avoided by peers



<input type="checkbox"/> Will not participate in activities	<input type="checkbox"/> Will wander away from/leave activities.		<input type="checkbox"/> Concern(s) observed in peer relationships
<input type="checkbox"/> No opportunity to observe	<input type="checkbox"/> No opportunity to observe	<input type="checkbox"/> No opportunity to observe	<input type="checkbox"/> No opportunity to observe

4. Please place a check next to the following statements that represent the student:

<input type="checkbox"/> positive attitude	<input type="checkbox"/> adaptable	<input type="checkbox"/> playful and carefree
<input type="checkbox"/> polite towards others	<input type="checkbox"/> quiet or shy	<input type="checkbox"/> appropriate emotional responses
<input type="checkbox"/> teachable spirit	<input type="checkbox"/> outgoing / socially confident	<input type="checkbox"/> forgives easily
<input type="checkbox"/> thankful and appreciative	<input type="checkbox"/> assertive	<input type="checkbox"/> in control of emotions
<input type="checkbox"/> respectful of authority	<input type="checkbox"/> creative	<input type="checkbox"/> shows aggression towards others
<input type="checkbox"/> obedient towards parents	<input type="checkbox"/> spiritually minded	<input type="checkbox"/> easily trusts others

5. In two to three sentences, please describe your experience with this student.

Print Name

Signature

Date



CWAA 2024-2025 FEE SCHEDULE

ANNUAL FEES <i>*(Non-refundable)</i>	SDA	Non-SDA	International
New Application	\$150*	\$150*	\$150*
Returning Student Registration	\$100*	\$100*	\$100*
Kindergarten	\$2,800	\$2,800	\$2,800*
Grades 1-6	\$3,600	\$4,500	\$10,200*
Grades 7-9	\$4,300	\$5,200	\$11,100*
Grades 10-12	\$5,700	\$6,600	\$13,000*
Bus Fees	\$2,200 for First Rider, \$1,400 for Second + Additional Rider(s)		

INTERNATIONAL FEES

Once CWAA issues a Letter of Acceptance and the student is issued a Student Visa by the Canadian Immigration Authority, based on CWAA's Letter of Acceptance, tuition fees are non-refundable. Only in the event of inability to attend school due to immigration difficulty will the tuition fee be refunded.

ADDITIONAL COSTS

- Extracurricular Athletics (\$20 - \$950): Cost varies per team and sport - subject to Tournaments & Trip Fees
- Secondary Options Fees (\$20 - \$100): Cost varies based on options selected
- Music Program (\$40 - \$950): Cost based on option class selection of Choir or Band for materials and equipment - subject to Tour Fees
- Retreats & Alberta Conference Initiatives (\$100-\$300): Covers the cost of an overnight retreat including transportation, food, accommodations, and activities
- International Mission Trip (Grades 10-12): Cost based on fees & expenses up to \$3000
- Hot Lunch Program (Kindergarten – Grade 12): Optional lunch program (approximately \$7-\$10 per lunch), available on average once per month during the school year
- School Uniforms: Cost dependent on student selection
- Fundraisers: A variety of school-wide fundraisers may occur throughout the year



INCENTIVE PROGRAMS

CWAA offers three financial incentive programs:

- *Multi-Child Family Fee Incentive:* Families with more than one child will receive a 5% reduction in fees for the second and third siblings.
- *Fourth-Child Incentive:* Families with a fourth child attending CWAA will receive 100% reduction in tuition fees for the fourth child. *Therefore, the fourth child is exempted from paying tuition fees.*
- *Referral Incentive:* Families that are instrumental in bringing a new family to CWAA will receive a \$250 discount per newly enrolled family. Both existing and new students must remain enrolled for a full school year to be eligible for the Referral Incentive. The \$250 discount is per family and not per student and will be applied in June. If this referral program applies to you please fill out the information form found in registration packets
** Note: The other family is also required to fill out this information on their submitted form*

Yes, my family is new to CWAA and I'm filling out this application for the referral program. We were referred to CWAA by the *_____ family that currently attends. **Please indicate referral family name*

Your Name

Signature

Date



FINANCIAL INFORMATION FORM

Parent/Guardian (or Payee): _____

Relationship to Student: _____

Home Phone: _____

Cell Phone: _____

Home Address: _____

Email Address: _____

ANNUAL FEES	SDA	Non-SDA	INTERNATIONAL
Kindergarten	\$2,800	\$2,800	\$2,800
Grades 1-6	\$3,600	\$4,500	\$10,200
Grades 7-9	\$4,300	\$5,200	\$11,100
Grades 10-12	\$5,700	\$6,600	\$13,000
Bus (first rider)	\$2,200	\$2,200	\$2,200
Bus (2 nd or 3 rd rider)	\$1,400	\$1,400	\$1,400

Use the above fee schedule above to complete the table below. Do not include application fees or any other additional fees in the table.

Student Name (First and Last Name)	Grade	Academic Fees	Bus Fees	Subtotal
Total Fees (all students)*				

**Where applicable, multi-student discounts and tuition subsidies will be applied by the Business Manager after admission.*



Please indicate your preferred payment method below:

- Use Payment Plan already on file (for returning families only)
- Full Year Payment
- Ten Month Online
- Ten Month Pre-authorized Bank Withdrawal (Attach a void cheque)
- Ten Month Pre-authorized Credit Card * (Visa / MasterCard only)

Name on Credit Card: _____

Credit Card Number: _____ [] Visa [] Mastercard

Expiry Date: _____

Security Code (CVV): _____

New Student Application Fees	\$150 (per student)**
Returning Student Registration Fees	\$100 (per student)**

- Please use my credit card information above for this application fee.
- I will make my application fee payment directly to the school office.

**** Applications are not processed until the application fee has been paid, and may affect processing order for registration and classroom wait lists.**

Yes. I commit to paying Chinook Winds Adventist Academy all monies owing, recurring tuition and busing fees according to the Annual Fees table outlined above, and any additional fees from other CWAA activities, sports and clubs.

Print Name

Parent/Guardian Signature

Date



SEVERE ALLERGY - HEALTH CONCERN ALERT FORM

Name of Student: _____

Student Grade: _____

Medic Alert ID: _____

This student has a dangerous, life-threatening allergy and/or health concern: (please describe below)

This student uses an inhaler? Yes No

This student uses an EpiPen? Yes No

- I agree to allow CWAA to share my student's picture, take emergency measures as necessary, with the staff of the school and health care providers.
- I will provide CWAA with updated medical information regarding my child during the school year.
- **If my child uses an Inhaler or EpiPen, I will make sure this is with them at all times (in their bags they bring to/from school and when away from school on a field-trip).**

Print Name

Signature

Date



PARENT SCHOOL BUS AGREEMENT

These Terms and Conditions form part of the Charter Transportation Contract with the bus company.

The Parent or Guardian:

- Acknowledges and agrees that the student must comply with the School Bus Safety Rules and School Bus Protocol while being transported to and from school.
- Is responsible for the safety of their student traveling to, from and at the bus stop.
- Understands that no changes shall be made regarding specific pick-up/drop-off locations and times without prior written request.
- Agrees that routes will be determined after all bus information has been received from all families. Bus routes are determined according to route safety and congregated community stops. Willco does not guarantee front door pick-up.
- Agrees to pay the annual fee referred to in this Contract and outlined .
- Understands that if they move their residence during the school year, the busing company provides no assurance that bus services will still be available at the new residence.
- Is eligible for a rebate should they no longer require transportation services; a prorated refund will be administered upon the receipt of the such request in writing.
- Acknowledges the bus company considers all routes to be full time and the school is charged accordingly. Students riding full or part-time pay the same rate.
- Understands that the student must be ready at his/her bus stop 5 minutes before the bus arrives; the scheduled "pick-up" time is the time when the bus pulls away from the stop. Students that are late to the bus will be left behind and will need to find alternate transportation.

STUDENT NAME	ENTERING GRADE	STUDENT PRIMARY RESIDENCE ADDRESS	SERVICE START DATE

AUTHORIZATION AND RELEASE OF INFORMATION AND ACCEPTANCE OF TERMS AND CONDITIONS

In signing this form:

- I am giving permission to CWAA to share the information above with the transportation provider for the purpose of transportation planning and administration;
- I certify that the information given in this application and in any documents attached is updated, correct and complete;
- I have read and agree with the terms of the Student School Bus Agreement.

Print Name

Signature

Date



STUDENT SCHOOL BUS AGREEMENT

Terms and Conditions

I understand that riding on the school bus is a privilege and not a right. I understand that I am responsible for my conduct while on the bus. I acknowledge that the school bus driver is responsible for my safety and transportation, and I am accountable to the bus driver while riding the bus. I understand that violating this agreement will result in disciplinary action and possibly a loss of bus riding privileges. My signature below indicates that I have read the following School Bus Agreement and I am committed to honoring and following the rules.

In particular, I will:

- Be ready at my bus stop 5 minutes before the bus arrives;
- Go promptly to my bus after school. Buses are scheduled to leave 10 minutes after the 3:20 p.m. bell rings;
- Remain on the bus until my approved destination has been reached;
- Be ready for and promptly get off the bus when my destination has been reached;
- Remain seated while the bus is in motion and sit facing forward with legs, arms and hands in the seat and not in the aisles or out windows;
- Not eating or drinking on the bus;
- Dispose of garbage in the assigned garbage before leaving the bus;
- Address the bus driver with courtesy and respect and follow their direction;
- Not distract the bus driver;
- Show courtesy and respect to all bus riders;
- Refrain from the use of inappropriate language;
- Refrain from yelling or speaking loudly on the bus;
- Refrain from throwing objects on the bus or out the bus windows;
- Refrain from harassment and bullying of any kind;
- Treat the bus with respect and report any damage;
- Represent the school to the public honorably while riding on the bus;
- Be a good citizen while riding the bus;
- Read and sign the School Bus Agreement prior to receiving bus transportation;

- Honor and follow the student policies as outlined in the Parent/Student Handbook.

Bus protocols:

- The bus will depart Monday to Thursday at 3:30 pm, and 1:30 pm on Friday
- Students that are late to the bus will be left behind and will need to find alternate transportation

Student's Name Signature Date

Student's Name Signature Date

Student's Name Signature Date



Chinook Winds Adventist Academy

VOLUNTEER REGISTRATION FORM

Volunteering at our school is vital for fostering a vibrant learning environment. Your involvement directly impacts student success and well-being. Whether in classrooms, events, or projects, your efforts shape a supportive community. Your commitment as a volunteer sets a positive example for our students and strengthens our school's unity and pride. It is our hope that each family will participate in various volunteer opportunities throughout the year. Thank you for making a difference!

Parent/Guardian Name: _____

Contact Phone #: _____

- I will submit a valid Vulnerable Sector Search (Police Check) under the agency of Chinook Winds Adventist Academy
- I have read and agree with the VOLUNTEER CODE OF CONDUCT in the Parent-Student Handbook

Please make your choices by checking the box next to the area(s) you wish to volunteer for:

CLASSROOM / STUDENT SUPPORT		
<input type="checkbox"/>	Classroom Parent	Work with the teacher to organize jobs, photocopying, laminating, other prep work
<input type="checkbox"/>	Field Trips	Help with supervision of children while on a field trip
<input type="checkbox"/>	Classroom Guest Speaker	Present an interesting story, testimony, or topic of expertise
OUTREACH / MISSIONS		
<input type="checkbox"/>	Prayer Team Coordinator	Coordinate meeting times and place, put announcements in Monday Breeze, etc.
<input type="checkbox"/>	Terry Fox Run	Work with staff member to help organize this event
<input type="checkbox"/>	Music Concerts	Help organize, decorate, help at bake sales, etc.
<input type="checkbox"/>	Chapel Speaker	Present an interesting story or testimony
<input type="checkbox"/>	Other idea(s):	
ATHLETICS		

