



APPLICATION FORM 2017-2018 SCHOOL YEAR

Please **complete both sides** of this application and return it to the Admissions Office, together with a photocopy of the **student's birth certificate**, **copies of his/her report cards** for the past two years and a non-refundable application fee of \$200. **Foreign students** must submit a **proof of residence (visa, residence card, other).**

Payment by Interac at <u>finance@lft.ca</u>, by wire transfer (contact <u>admissions@lft.ca</u>) or by mail (cheque to the order of Lycée Français de Toronto).

STUDENT INFORMATION							
Will the student be residing with a hos	st family? If yes, what would b	e the duration of t	he stay (If no	t enrolling for a	full year, please specif	y expected	
date of arrival and departure):							
First Name(s)	Preferred Name	red Name Family Name				Gender	
						F - M	
Date and place of Birth (MM/DD/YYYY)	<i>(</i>)			Nationality	ı (ies):		
Student's knowledge of French			Student's knowledge of English				
Stadent's known	eage of Trenen			Stautint 5 know	ricage of English		
Beginner	Advanced	Beginne	Beginner		Advanced		
		·					
SCHOOL INFORMATION							
Current Grade	Applying to Grade	oplying to Grade		Expected date of arrival			
Name and Address of							
present school							
present sense.							
Telephone	e Fax		E-mail				
Previous school (s) - from most recent	Year	Grade att	tandad	Reason for	loguing		
Frevious school (s) - from most recent	reur	Grade att	Grade attended Reason f		leaving		
L	L	L		1			
How did you hear about the Lycée? Why did you choose the school?							

FAMILY INFORMATION

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Language(s) spoker	n at home				
Parent/ Guardian 1	First and last name : Mr.; Mrs; Ms				
	Home phone number	Cell:			
	E-mail for school's correspondence:				
		Occupation:			
Parent/ Guardian 2	First and last name : Mr.; Mrs; Ms				
	Home phone number	Cell:			
	E-mail for school's correspondence:				
	Office phone number Occupation:				
	Employer's name and address				
Does the student have any special needs (Please explain)	3				
	Allergies:				
Date:		Signature			