



Admissions Application

Immanuel Christian School

2026-27



120 Glovers Road, Oshawa, ON

905-728-9071

office@immanuelschool.ca

Thank you for considering Immanuel Christian School for your child's education. Your application is important to us.

Please note the following:

1. Filling in the application does not guarantee acceptance. There are numerous factors involved in being accepted to Immanuel Christian School.
2. Please fill in all parts of the application and complete the checklist below to confirm.
3. It is very important to indicate any educational or psychological testing that your child has had so that we know how to meet the needs of your child. Please include any other information our school would require as part of their education program.
4. Please include your child's last report card with the application.
5. Please include your child's IEP if they have one.
6. Once your child's application has been received, it will be reviewed by the Principal and Vice-Principal. If your child is accepted, you will receive an acceptance letter from the office.

Application Checklist:

Please mark each item to confirm completion

Application

- Family Information
- Custody Information
- Church Information
- Physician Information
- Emergency Contact
- Student Information
- Photo Consent form
- Field Trip Consent Form
- Bus Protocols and Procedures
- School-Family Partnership Agreement/Declaration
- Payment Plan Option
- PAD Form / Void Cheque
- Uniform Policy
- Volunteer Program

Additional Documents

- Copy of student birth certificate or passport
- Copy of current report card
- Copy of IEP (if applicable)
- Copy of student immunization records or statement of conscience

APPLICATION FOR IMMANUEL CHRISTIAN SCHOOL 2026-27

Part 1: Family Information

Kindly complete and submit with the registration fees.

Family Name: _____

(Last name of student(s))

Home Phone: _____

Family Address: _____

Guardian Information

Male Guardian: _____

Female Guardian: _____

Relationship: _____

Relationship: _____

Cell Phone: _____

Cell Phone: _____

Email: _____

Email: _____

Occupation: _____

Occupation: _____

Work Phone: _____

Work Phone: _____

If parents are currently separated or divorced, who has legal custody? _____

Is there a custody document in place? Yes No

***The school must have a copy of any legal custody documents.**

Family Physician: _____ Phone Number: _____

Name of Home Church: _____

(if applicable)

Church Email: _____ Phone: _____

Pastor's Name : _____

Is Busing Required? Yes No

Please note, we will attempt to accommodate all busing requests; however, space is limited. Busing will be offered on a first-come, first-served basis based on a fully completed application form, including registration fees.

Emergency Contact Information
(Must be an adult other than the students' guardians)

Name: _____ Home Phone: _____

Relation to Student(s): _____ Cell Phone: _____

Documentation

Please present the following items to the office with your application.
Your child's application will not be considered without these documents.

-
- Birth Certificate
A copy of your child's birth certificate must be kept in their student file and OSR (Ontario Student Record).
Please bring the original to the office where a copy will be made of the certificate.
 - Immunization Records
A copy will be kept in the school office in your child's file.
 - Copy of your child's most recent report card
 - Copy of your child's most recent IEP, if applicable

Part 2: Student Information

First Student Enrollment Information:

First Name

Middle Name

Last Name

Gender: _____ Age: _____ Grade Enrolling: _____

Birth Date: _____ Health Card Number: _____
(MONTH/DAY/YEAR)

Allergies & Treatment

Please list your child's allergies and treatment. You will be contacted to create a more personalized action plan for your child's needs:

Medication

Please list any medication your child takes on a regular basis:

Does this medication need to be taken during school hours? Yes* No

**If yes, please see the office for an 'ICS Student Medication Administration Plan'*

Is there any medical reason why your child cannot participate in the physical education program? Yes* No

**If yes, please explain:*

Has your child ever been referred for testing? Yes No

Are there any professional reports? Yes* No

**If 'yes', please submit a copy of those reports with your application. To determine if we can meet the needs of the student, we must receive complete information about the student. Failure to provide the school with all related information could result in insufficient resources to meet the student's needs. This could jeopardize the student's continued enrollment.*

Please record any information regarding your child's physical or mental health and development that you would like to bring to our attention (chronic health issues, operations, injuries, etc.):

Is this your child's first time attending school? Yes No*

**If 'no', please provide the following information:*

Name of previous school: _____ City: _____

Why is your child transferring from his/her present school? _____

How did you hear about Immanuel Christian School? _____

Second Student Enrollment Information:

First Name

Middle Name

Last Name

Gender: _____ Age: _____ Grade Enrolling: _____

Birth Date: _____ Health Card Number: _____
(MONTH/DAY/YEAR)

Allergies & Treatment

Please list your child's allergies and treatment. You will be contacted to create a more personalized action plan for your child's needs:

Medication

Please list any medication your child takes on a regular basis:

Does this medication need to be taken during school hours? Yes* No

**If yes, please see the office for an 'ICS Student Medication Administration Plan'*

Is there any medical reason why your child cannot participate in the physical education program? Yes* No

**If yes, please explain:*

Has your child ever been referred for testing? Yes No

Are there any professional reports? Yes* No

**If 'yes', please submit a copy of those reports with your application. To determine if we can meet the needs of the student, we must receive complete information about the student. Failure to provide the school with all related information could result in insufficient resources to meet the student's needs. This could jeopardize the student's continued enrollment.*

Please record any information regarding your child's physical or mental health and development that you would like to bring to our attention (chronic health issues, operations, injuries, etc.):

Is this your child's first time attending school? Yes No*

**If 'no', please provide the following information:*

Name of previous school: _____ City: _____

Why is your child transferring from his/her present school? _____

How did you hear about Immanuel Christian School? _____

Third Student Enrollment Information:

First Name

Middle Name

Last Name

Gender: _____

Age: _____

Grade Enrolling: _____

Birth Date: _____
(MONTH/DAY/YEAR)

Health Card Number: _____

Allergies & Treatment

Please list your child's allergies and treatment. You will be contacted to create a more personalized action plan for your child's needs:

Medication

Please list any medication your child takes on a regular basis:

Does this medication need to be taken during school hours? Yes* No

**If yes, please see the office for an 'ICS Student Medication Administration Plan'*

Is there any medical reason why your child cannot participate in the physical education program? Yes* No

**If yes, please explain:*

Has your child ever been referred for testing? Yes No

Are there any professional reports? Yes* No

**If 'yes', please submit a copy of those reports with your application. To determine if we can meet the needs of the student, we must receive complete information about the student. Failure to provide the school with all related information could result in insufficient resources to meet the student's needs. This could jeopardize the student's continued enrollment.*

Please record any information regarding your child's physical or mental health and development that you would like to bring to our attention (chronic health issues, operations, injuries, etc.):

Is this your child's first time attending school? Yes No*

**If 'no', please provide the following information:*

Name of previous school: _____ City: _____

Why is your child transferring from his/her present school? _____

How did you hear about Immanuel Christian School? _____

Part 3: Photo Consent

2026-27

This consent form is to request and formalize in writing your permission to use tasteful and positive photographs taken of your child(ren) at school and school events. Photography is a meaningful tool for promotion, and pictures of our children will be used thoughtfully and carefully in promotional materials, brochures, videos, newsletters, social media or on the website.

Please check the appropriate box to give or decline consent, and sign below.

I/We

Guardian One Name (print)

Guardian Two Name (print)

- Fully** consent to
- Give **limited*** consent to
**If 'limited', please indicate what you consent to*
 - Brochures and Booklets
 - Newsletter (*circulated to ICS families, members and stakeholders*)
 - Social media and school website
 - Seesaw and Google Classroom
- Do not give consent to

Immanuel Christian School to use photographs of my child(ren) for the purposes of school promotion through newsletters, the website, brochure, and/or social media.

Guardian One Signature

Guardian Two Signature

Part 4: Field Trip Consent Utilizing Professional Drivers

2026-27

The curricular program at Immanuel Christian School incorporates several off-campus field experiences to support and enrich student learning. All students are expected to participate in these school-approved events as they are integral to achieving stated learning goals.

I/We

Guardian One Name (print)

Guardian Two Name (print)

give permission for Immanuel Christian School to transport my child(ren) by school bus or van to any off-campus activities planned by staff.

Guardian One Signature

Guardian Two Signature

* All families must read and sign the Bus Protocols and Procedures on the following pages.

Part 5: Bus Protocols and Procedures | Bus Family Agreement

To be signed by all families

2026-27

Immanuel Christian School has a long tradition of offering bus service to families in the Durham region. This document outlines our bus protocols and procedures and serves as a contract between the school and **all** families, including those who only use the bus for field trips. Please read it carefully and review the expectations and privileges of bus use with your child(ren).

A successful busing program depends on shared responsibility and cooperation among students, parents, school staff, and bus drivers. Together, we aim to ensure a safe, efficient, and positive transportation experience throughout the school year.

A. Protocols for Bus Students – Please read to your child/children

1. Students must obey and respect the instructions given by the driver.
2. Please wait 10 feet back from the roadway and wait until the bus comes to a complete stop and the door is open before boarding the bus in single file. Sit in your assigned seat.
3. School van only: Please buckle your seatbelt. Some younger students will be helped by the bus driver or an assigned helper. Seat belts must never be unbuckled until the van has come to a complete stop at the school.
4. Students must remain seated at all times. No turning around or standing.
5. No eating or drinking on the bus is allowed.
6. Keep your arms and head inside the bus if the window is open.
7. Do not play or touch the emergency exits or any latches, etc.
8. Enjoy conversation with the people around you. Please keep your voices quiet so the bus or van driver does not get distracted.
9. Students may only get off the bus at their own bus stop unless an emergency has occurred, and changes have been made with the permission of the principal and notification of the office.

B. Protocols for Parents/Guardians

1. Please arrive on time at your bus stop (on time is 5-10 minutes early). The bus driver cannot wait for late arrivals.
2. If there is a day when your child will not be taking the bus, it is the parent's responsibility to notify the driver by 7 a.m. *Please do not message drivers before 6:00 am or after 8 pm* (Driver's phone numbers will be provided). If your child will not be taking the bus in the afternoon, you must contact the office via phone call only. (Please contact the office by 2:30 pm at the latest. Please do not email the office for changes. They may not be read on time.)
3. It is possible that larger items may not fit on the bus or be transported safely. You will have to arrange for larger items to be brought to the school through a personal vehicle.
4. When picking your child up from the bus stop, please be waiting at the stop for your child to get off the bus at least 5 minutes before drop-off time. A parent (or a designated guardian/older sibling) must come out to meet their children from the bus. If no one is there to meet the child, a phone call to the parent will be made by the school. If you are not at your child's stop at the appointed time, you must pick up your child at the school when the bus driver has completed the route.
5. Please be aware that on some occasions, a bus breakdown may occur or an ill driver may not be available to drive. Text messages, phone calls or emails will be sent to all parents informing them of the issue. In this case, parents have the responsibility to pick up their child at the vehicle breakdown location and transport their child to and from school on that day. Please communicate with the bus driver and, if necessary, the principal, about any concerns that relate to the bus.

Disciplinary Procedures for Bus Misconduct

If a student's behaviour on the bus becomes problematic or a specific issue requires discipline, the principal or the vice principal of the school will speak to the student(s) involved and quite possibly contact the parents depending on the severity of the issue. The bus driver will be made aware of any discipline issues that require changes to a routine, bus privileges, etc.

Bus Discipline Procedures — Normal Pattern

- Step 1* Student warning by the bus driver.
- Step 2* Student warning by the bus driver and notification to the school principal by verbal report or by using a Report of Misconduct on Bus. Student warning by the school principal/vice principal and parents/guardians will be notified.
- Step 3* Temporary suspension of bus riding privileges by the principal for 1 day, 1 week, or 1 month as merited by the misconduct.
- Step 4* Riding privileges will be revoked by the principal for the remainder of the year. The student, parents/ guardians and bus driver will be notified by formal correspondence.

Signature required for *all families*, as all students will be taking the bus on occasion for field trips.

Parent(s)/Guardian(s):

I have read, understand, and agree to all sections of the Bus Protocols and Procedures document. Furthermore, I have carefully explained bus expectations and opportunities to my child(ren) and will regularly remind them of their responsibilities to honour this agreement. Working in collaboration with the school and its bus drivers, I will actively support all aspects of this agreement.

Guardian One Name (print)

Guardian Two Name (print)

Date: _____

Home Phone: _____

Home Address: _____

Cell Phone One: _____

Cell Phone Two: _____

Part 6: School-Family Partnership Agreement

2026-27

"Train up a child in the way he should go, even when he is old, he will not depart from it."
Proverbs 22:6

"Impress them on your children. Talk about them when you sit at home and when you walk along the road, when you lie down and when you get up." Deuteronomy 6:7

Mission

To provide a learning environment of academic excellence with a Christ-centered worldview to cultivate the best in our students.

Vision

To create bold and inspirational Christ-like individuals who will positively impact their communities.

Immanuel Christian School is committed to helping every student grow in learning, contribute positively in a changing world, and honour God. We aim to provide meaningful and challenging learning experiences that build both Christian character and essential 21st-century skills.

We recognize that parents hold the primary responsibility for guiding their children toward responsible and godly lives; however, ICS shares this mission by educating, encouraging, and equipping students within the school setting.

This partnership agreement reflects that shared responsibility, uniting parents and the school in mutual commitments to support each child's growth and fulfill God's plan for their lives.

Your signature below indicates your commitment to the School-Family Partnership Agreement.

Specifics of the Partnership Agreement

As a school, we commit to the following:

- Articulating and fulfilling our purpose, vision, and goals
- Demonstrating Christian character, conduct, & professionalism
- Cultivating positivity, gratitude, a patriotic community spirit, pride of school & ambassadorship
- Providing support, advocacy, and prayer for your child/your family/the school community
- Ensuring respect and confidentiality regarding your child/your family/the school community
- Fostering a safe and nurturing learning environment where varied learning styles are honoured
- Embracing rigorous, technology-infused, 21st-century teaching/learning/assessment practices
- Planning ongoing, high-quality professional development to stay current
- Maintaining consistent communication regarding your child and the school
- Maintaining an appropriate and consistent approach to the discipline process
- Providing a wide variety of opportunities for involvement
- Ensuring wise use of resources entrusted to the school

As parents / guardians we commit to the following:

- Becoming familiar with and supporting the school's purpose, vision, values, goals, and accepting school policies
- Supporting in our home, the Christian values and beliefs taught at the school
- Demonstrating Christian character and conduct in all school-related communication and participation
- Consistently supporting in prayer my/our child and the school community in all joys, challenges, and concerns
- Exercising appropriate confidentiality and respect for the entire school community
- Enhancing my/our child's learning success with a quiet, engaging home study environment, consistent study time, and assistance when needed
- Becoming familiar with and supporting my/our child in understanding, managing, and mastering school processes, programs, and curriculum
- Fostering a life-long love for reading in my/our child by regularly reading with and to them and/or encouraging them to maintain a regular habit of reading
- Advocating for my/our child in well-thought-out, healthful ways, maintaining consistent communication, and attending parent-teacher conferences
- Seeking information and facts - I/We will not undermine community health by listening to, believing, or perpetuating gossip and rumour
- Communicating with staff & community in a respectful and God honouring way, demonstrating trust & understanding
- Being appropriately involved - volunteering my/our time, talents, and resources with a cheerful and generous spirit, and attending community or committee meetings and events
- Honouring the mutually agreed-upon financial commitment I/we made upon enrollment in the timely manner outlined in the ICS school tuition policy
- Honouring the full-year attendance of my/our child, understanding the financial commitments of the school. *If special circumstances warrant early withdrawal from the school, 30 days notice must be sent to the principal ahead of your next tuition payment date*

The Declaration

With a promise of mutual accountability, I/we hereby agree to a partnership that fully supports the commitments listed in this document. I/we understand that if I/we choose to withdraw our student(s) mid-year, I/we must provide 30 days' notice before the next withdrawal.

Signed on _____ 2025
WEEKDAY MONTH DAY

Guardian One Name (print)

Guardian Two Name (print)

Guardian One Signature

Guardian Two Signature

ENROLLMENT FACTS

Registration, Tuition & Program Fees

PLEASE NOTE: PRICES ARE SUBJECT TO CHANGE FOR THE 2026-27 SCHOOL YEAR

1. A Non-Refundable Registration Fee. *Due at enrollment to hold your child's spot in the school*

UNDERSTANDING THE REGISTRATION FEE

There is an **annual \$300 registration fee** for each child in your family who is enrolling at Immanuel. This fee must be paid upon receiving verbal notice of acceptance to reserve the space for your child. The Registration Fee covers the cost of consumable school supplies, trips, and special events throughout the school year. The only exception may be optional extra-curricular program participation costs (such as academic or sports team competitions), which will be billed separately at the appropriate times. In addition, this fee covers the cost of your student's enrollment administration.

TUITION FEES

Due to the nature of education, much of the planning required to run an effective school must be done on a yearly basis. Significant financial commitments are made annually: teachers are hired, curriculum and capital assets are purchased, programs are developed, and a host of other plans are created to function for the entire year. As such, by enrolling your child(ren) at Immanuel Christian School, you are committing to partner with the school for the full year. For families entering the school mid-year, you are committing to partner with Immanuel Christian School for the remainder of the school year.

2. A Program & Family-Based Tuition

Grades and Number of Students	Total Annual	10 Monthly Payments
1 student at 5 full days JK/SK program	10,500	1,050
1 student Gr. 1 program	11,200	1,120
1 student Gr. 2 - 8 programs	12,400	1,240
2 students JK – Gr. 8 programs	16,300	1,630
3 students JK – Gr. 8 programs	18,800	1,880
4 students JK – Gr. 8 programs	19,800	19,800

IMPORTANT:

1. Tuition payments are *prepaid*.
2. Ten monthly payments will begin on Aug 1st, 2026, and finish on May 1st, 2027
3. Families that pay a lump sum for the entire year will be offered a 2% tuition discount. This lump sum must be paid by August 1st, 2026 to qualify for the discount and cannot be combined with any other discount or school-provided financial aid.
4. Transportation costs will be updated each spring. Please ask about these costs if you require busing.
5. Tuition rates are based on 20 hours of volunteering per year for each family (10 hours for single-parent families). Families will be notified mid-June if the expected number of volunteer hours have not been met, and any outstanding hours will be billed at \$25/hr. Please refer to the parent volunteer program included in this package on page 17.
6. Registration fees may be paid by e-transfers to finance@immanuelschool.ca . Please include your child's full name in the memo.

PAYMENT PLANS

Cash, cheque and pre-authorized debit (PAD) accepted)

PLEASE CHOOSE ONE PAYMENT OPTION BELOW:

OPTION A

One lump sum in cash or cheque, plus any registration fees - due August 1st, 2026 (*this option qualifies for 2% tuition discount. There is no discount on registration fees.)

OR

OPTION B

Ten monthly payments (post-dated cheque or pre-authorized debit) - due the first of each month, beginning Aug. 1st, 2026.

E-transfer is not accepted for monthly tuition payments.

Please note that timely payments are necessary to ensure successful financial operations.

Occasional lump sum payments after August 1st *will not be accepted.*

Late fees and an NSF fee of \$50 will apply.

I/We have read and understand the ICS Payment Policy as outlined above.

Guardian One Name (print)

Guardian Two Name (print)

TAX-RECEIPTS

A *portion* of paid tuition *may* be eligible for a tax receipt. Eligibility is based on several factors and will be different for each family. These receipts are issued in February, based on the prior calendar tax year.

To help us issue accurate receipts, please provide the name to be used on the tax receipt.

Please print clearly:

Part 7: Pre-Authorized Debit Agreement

For Tuition 2026-27

This PAD agreement authorizes Immanuel Christian School and the financial institution designated to debit the bank account identified for all charges arising under my/our Tuition Agreement with Immanuel Christian School.

I/We authorize Immanuel Christian School and the financial institution designated (or any other financial institution I/We may authorize at any time) to deduct the variable charges as per my/our Tuition Agreement and/or one-time payments,

from time to time, for payment of all charges arising under my Immanuel Christian School account. These include re-registration fees, volunteer fees, late fees or NSF fees. Regular monthly payments as per my/our Tuition Agreement, will be debited to my/our specified account on the 1st banking day of each month when the payment is due. It is my responsibility to ensure there are enough funds in the account on or before the 1st of the month.

Immanuel Christian School will obtain my/our authorization for any one-time or sporadic debits.

This authorization is to remain in effect until Immanuel Christian School has received written notification from me/us of its change or termination whereby 30 days written notice is given. I/we may obtain a sample cancellation form, or more information on my/our right to cancel a PAD agreement at my/our financial institution.

I/we have certain recourse rights if any debit does not comply with this agreement. For example, I/we have the right to receive reimbursement for any PAD that is not authorized or is not consistent with this PAD agreement. To obtain a form for a Reimbursement Claim, or for more information on my/our recourse rights, I/we may contact my/our financial institution.

Date: _____ Type of Service: Personal
 DAY MONTH YEAR

Name(s): _____

Address: _____

City/Town: _____ Province: _____ Postal Code: _____

Financial Institution: _____

Bank Account Number: _____ Transit Number: _____

Bank Address: _____

City/Town: _____ Province: _____ Postal Code: _____

Authorized Signature*: _____

***REQUIRED ANNUALLY**

Please attach a copy of a voided personal cheque OR pre-authorized debit form from your bank and submit it with the registration application.

Please send the registration fee of \$300 per child to finance@immanuelschool.ca and include your child's full name in the memo/comment line.

Part 8: ICS UNIFORM POLICY

2026-27

It is the board's desire for our school to stand out in the Durham Region as a place where we educate, encourage, and equip our students with academic excellence as they learn and grow in their faith. We believe our uniforms help to communicate our commitment to do just that.

Immanuel Christian School has partnered with *DGN Kilters Uniforms* to provide our school uniforms.

All students are required to be in uniform every school day unless otherwise communicated by the school (special events or dress-down days). We have two types of uniforms, everyday and formal. Certain items **must** be purchased from our uniform provider; however, some everyday items may be purchased from alternate retailers' uniform lines. These include Old Navy, The Gap, Carter's, and Children's Place.

I/We have read and understand the ICS Uniform Policy as presented in the ***School Information Booklet***.

I/We ***agree to abide by the ICS Uniform Policy*** as presented in the ***School Information Booklet***, ensuring that our children will be dressed in the proper uniform every day.

Signed on

2025

Weekday

Month

Day

Guardian One Name (print)

Guardian Two Name (print)

Guardian One Signature

Guardian Two Signature

Part 9: ICS Volunteer Program

2026-27

The parent volunteer program is an essential part of our planning and vision at Immanuel Christian School and has been designed to help accommodate all families and allow them to participate without burden yet maintain a high level of commitment. Please read and see how you can earn your volunteer hours.

Immanuel Christian School implemented the Parent Volunteer Program for the following reasons:

- to promote a greater sense of community through participation
- to help parents plan their involvement throughout the year
- to reduce costs through increased volunteer participation
- to increase awareness and appreciation for the amount of effort needed for various activities
- to encourage parents to participate in school fundraising activities and other school-related activities and needs

How the program works:

- Parents are asked to commit 20 hours/year to assist in the many needs and activities of the school.
- If a family knows they will be unable to make this commitment, we require a post-dated cheque (dated June 15th, 2026) according to the chart below **or** have an amount added to their Pre-Authorized Debit program.
- Parents will be notified of volunteer opportunities by email and/or listed in the weekly newsletter.
- Although parents are required to keep track of their hours, each volunteer opportunity must be signed off by either the principal or the principal's designate.
- Volunteer hours can be covered by parents, guardians, grandparents or other family members.
- At the end of May, hours for each family will be tallied. Families will be notified by mid-June if the expected number of volunteer hours have not been met, and any outstanding hours will be billed at \$25/hr
- *There will be no pooling of hours or carry-over of hours to the next year.*

ALL volunteers who will be working with or in close proximity to children MUST provide a current Vulnerable Sector Screening police check to be kept on file at the school office and, in some cases, sign a confidentiality agreement. This screening process must be updated every 2 years.

The cheque or Pre-Authorized Debit to opt out of the volunteer program should be post-dated on June 15th, 2026, in amounts as follows:

Family	20 hours	OR	\$500.00 cheque/PAD withdrawal
Single Parent Family	10 hours	OR	\$250.00 cheque/PAD withdrawal

I/We have read and understand the ICS Volunteer Program information as presented.

Signed on

WEEKDAY

MONTH

DAY

YEAR

Guardian One Signature

Guardian Two Signature