

Rockway Mennonite Collegiate is for Grade 7-12 students of all faiths and cultural backgrounds who want to belong to an academic community that thrives within a Mennonite tradition of peaceful conflict resolution. Rockway forms faith and builds character in a strong academic environment. Students will work hard, respect the values of the community, and be open to the guidance and instruction that will enable them to become responsible, globally-minded, compassionate and reflective citizens of our community and world. Families of Rockway students commit themselves to collaborative relationships between home and school that foster the best possible learning outcomes. Students who thrive at Rockway immerse themselves in our rich and diverse range of academics and extracurricular opportunities, and make positive contributions to the classroom, sports, chapel and the arts.

STUDENT INFORMATION

SCHOOL YEAR: 20____-20____ SEMESTER 1 & 2: SEMESTER 1 ONLY: SEMESTER 2 ONLY:

APPLICATION FOR GRADE: 7 8 9 10 11 12

| | | | | |
|----------------------------------|--|----------------|----------|---------------------|
| LAST NAME | | FIRST NAME | | |
| MIDDLE NAME | | PREFERRED NAME | | |
| ADDRESS (Street, PO Box, RR#) | | CITY | PROVINCE | POSTAL CODE COUNTRY |
| EMAIL | | HOME PHONE | | |
| DATE OF BIRTH | | Gender _____ | | |
| Month _____ Day _____ Year _____ | | | | |

FAMILY INFORMATION

| | | | | |
|---|--|--|----------|---------------------|
| PARENT/GUARDIAN LAST NAME | | FIRST NAME | | |
| RELATIONSHIP TO APPLICANT | | DATE OF BIRTH | | |
| Father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian <input type="checkbox"/> | | Month _____ Day _____ Year _____ | | |
| ADDRESS (Street, PO Box, RR#) <i>if different from above</i> | | CITY | PROVINCE | POSTAL CODE COUNTRY |
| HOME PHONE | | MOBILE PHONE | | |
| EMAIL | | | | |
| EMPLOYER/OCCUPATION (optional) | | ROCKWAY GRADUATE? | | GRAD YEAR |
| | | Yes <input type="checkbox"/> No <input type="checkbox"/> | | _____ |
| PARENT/GUARDIAN LAST NAME | | FIRST NAME | | |
| RELATIONSHIP TO APPLICANT | | DATE OF BIRTH | | |
| Father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian <input type="checkbox"/> | | Month _____ Day _____ Year _____ | | |
| ADDRESS (Street, PO Box, RR#) <i>if different from above</i> | | CITY | PROVINCE | POSTAL CODE COUNTRY |
| HOME PHONE | | MOBILE PHONE | | |
| EMAIL | | | | |
| EMPLOYER/OCCUPATION (optional) | | ROCKWAY GRADUATE? | | GRAD YEAR |
| | | Yes <input type="checkbox"/> No <input type="checkbox"/> | | _____ |

AGENT INFORMATION

| | | | | |
|---|------------|----------|-------------|---------|
| DO YOU HAVE AN AGENT OR REPRESENTATIVE ASSISTING YOU? Yes <input type="checkbox"/> No <input type="checkbox"/> <i>If yes, please complete the following:</i> | | | | |
| NAME OF AGENT / REPRESENTATIVE | | | | |
| ADDRESS (Street, PO Box, RR#) | CITY | PROVINCE | POSTAL CODE | COUNTRY |
| EMAIL | HOME PHONE | | | |
| DO YOU HAVE A GUARDIAN IN CANADA? | | | | |
| NAME OF GUARDIAN | | | | |
| ADDRESS (Street, PO Box, RR#) | CITY | PROVINCE | POSTAL CODE | COUNTRY |
| EMAIL | HOME PHONE | | | |
| IS HOME STAY NEEDED? Yes <input type="checkbox"/> No <input type="checkbox"/> | | | | |

SCHOOL INFORMATION

| | |
|--|---------------|
| CURRENT SCHOOL | CURRENT GRADE |
| SCHOOL ADDRESS | |
| ACTIVITIES APPLICANT IS INVOLVED IN AT CURRENT SCHOOL | |
| | |
| | |
| PROVIDE FURTHER DETAILS AS APPLICABLE TO YOUR APPLICANT'S EDUCATIONAL EXPERIENCE | |
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STUDENT PROFILE

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|--------------------------------|
| WHY YOU WISH TO ATTEND ROCKWAY |
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STUDENT PROFILE *(continued)*

INTERESTS AND ACTIVITIES

- I have access to a computer at home: Yes No
 - I use the computer mostly for: Internet Games Email Chat School Work
- I watch TV: 2-4 hours/day 1-2 hours/day less than 1 hour almost never
- I listen to music: 2-4 hours/day 1-2 hours/day less than 1 hour almost never
- I like to read: every day 3-4 times/week 1-2 times/week only for school almost never
 - I read: Comic books Science fiction Non-fiction Magazines Adventure stories
Romance Biography Other _____
- I like to watch movies: 3 times/week 1/week 2-3 times/month 1/month
- I like to play board/card games: a lot regularly not much hardly ever
- I like to play video games: a lot regularly not much hardly ever
- I like to spend time with my friends: every day 3-4 times/week 1-2 times/week
- I prefer to eat at: Fast Food Restaurant Home Other _____
- I like to spend time on my own: every day 3-4 times/week 1-2 times/week never
- I like to be organized and know what I'm doing well in advance: Yes No
- I like to be casual and do things last minute: Yes No
- I like to be busy: all the time most of the time some of the time as little as possible
- I like to be physically active: all the time most of the time some of the time as little as possible
- I like to be outside: all the time most of the time some of the time as little as possible

ACADEMICS

- My favourite subjects are: _____
- I do very well in: _____
- Subjects I find challenging are: _____
- Subjects I want to learn are: _____
- My Post-Secondary plan is: _____

ARTS

- I like: drawing painting photography other crafts _____
- My favourite music is: _____
- I take music lessons: Yes No
 - I play the following instrument(s): _____
 - I would like to take private lessons at Rockway: Yes No
- I like to sing: by myself in a group (choir)
- I like to: watch dramas/plays participate in dramas/plays

STUDENT PROFILE *(continued)*

ATHLETICS

- I enjoy team sports: Yes No
 - My favourite sports team is: _____
- I play sports: for fun competitively
- I enjoy individual sports: Yes No
 - My favourite individual sport is: _____
- I would like to play sports at Rockway: Yes No
 - I would like to play _____ while at Rockway

PERSONAL INFORMATION

LANGUAGE

- My spoken English is: weak average strong
- My written English is: weak average strong
 - Comments: _____
- My parent(s) speak English: very well well a little bit not at all
 - Comments: _____

TRAVEL

- I have been on an international exchange before: Yes No
 - Where: _____
- I have travelled internationally before: Yes No
 - Where: _____

HEALTH

- I smoke: Yes No • My parents/other family members smoke: Yes No
- I have experienced depression, anxiety and/or another mental health issue: Yes No
- I am on medication: Yes No
 - Please describe any existing health-related issues that are important for Rockway and Host Families to know about:

EATING HABITS

- Which statement best reflects your eating habits: I eat meat I am vegetarian I am vegan
- I like to eat healthy: Yes No
- Food allergies: Yes No *If yes, please list them:*
 - My food allergies: _____
- Foods I like: _____
- Foods I dislike: _____

RELIGION

- My family is religious: Yes No Religion: _____
- My family/I attend religious services regularly: Yes No
 - Comments: _____

PETS

- We have animals in our home: Yes No
- If home stay is required, I can go into a home with pets: Yes No

COMMITMENT TO ROCKWAY'S PROGRAMS

I commit to study seriously, to honour Rockway's Policies, Practices and Procedures, to regularly attend classes and chapels and to cooperate fully in school programs and activities.

STUDENT SIGNATURE

DATE

As parent/guardian, I approve the applicant's enrollment at Rockway Mennonite Collegiate and will support my child and the Faculty/Staff in fulfilling the aims and objectives of the school. I understand that final acceptance is granted following a review of all information, including an interview, and is at the sole discretion of Rockway Mennonite Collegiate. I agree to meet all financial obligations promptly. I understand that Rockway relies on tuition fees and donations to cover school costs.

I understand that if my child develops a serious mental or physical challenge during their time at Rockway, it will be my responsibility as the parent to come to Canada, or for my child to return home.

PARENT/GUARDIAN SIGNATURE

DATE

SUBMISSION INFORMATION

This information is collected by Rockway Mennonite Collegiate for the purpose of administering the admissions process. All information on this form will remain confidential and will not be shared with any outside source.

If your application is accepted, you will need to pay all fees within 4 weeks. After payment has been received, Rockway will issue an official Letter of Acceptance to be presented to immigration authorities for a student visa and/or study permit.

Tuition fees are non-refundable unless a student is unable to obtain a student visa. Request for refunds must be accompanied by a letter from the Canadian Department of Immigration stating the visa application has been refused along with the reason.

If you are admitted to Rockway Mennonite Collegiate ("Rockway") as per your current application, please note that such admission shall not be any guarantee of readmission for any year(s) following such admission. All applicants shall be required to apply for readmission to Rockway for each academic year that such applicant wishes to attend. Readmission of applicants shall be in the sole and unfettered discretion of Rockway's appointed representatives and is in no way guaranteed. Moreover, applicants who fail to apply for readmission to Rockway by completing the proper application form(s) and submitting such forms to Rockway before the appropriate deadline in each academic year will be considered to have withdrawn from Rockway.

APPLICATION CHECKLIST

PLEASE COMPLETE THE FOLLOWING AND RETURN TO DAVID LOBE, INTERNATIONAL PROGRAM DIRECTOR BY EMAIL davidl@rockway.ca

INTERNATIONAL STUDENT APPLICATION APPLICATION FEE (\$400) (payable by credit card)

<http://rockway.ca/admission/international/application-process/> COPY OF REPORT CARD(S)

COPY OF PASSPORT COPY OF IMMUNIZATION RECORDS

OTHER RELEVANT DOCUMENTS _____



#lifeatRockway

Rockway Mennonite Collegiate
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Charitable #: 119122091RR0001