



BIALIK HIGH SCHOOL

**Application Package
2010-2011**



Bialik High School

Guide to Admissions Procedure

September 2010 Entry



We are pleased to consider your application. Please feel free to contact the school at any stage during the application process if you have questions or concerns.

Admissions Secretary:

Telephone number:

Email:

Office Hours:

Mrs. E. Burbela

514-481-2736, ext. 221 • Fax number: 514-483-6391

e.burbela@bialikmtl.ca

Monday–Thursday: 8:00 AM to 4:00 PM

Fridays: 8:00 AM to 2:40 PM

APPLICATION FOR ADMISSION

Please complete the Admission form, Application for Admission, Supplemental Information, and Educational Services Contract forms and bring them to Bialik in person no later than **Friday, November 6, 2009**. A registration fee/deposit of **\$200** must accompany the application. The registration fee/deposit is non-refundable and non-transferable. The registration fee/deposit will be applied against 2010–2011 school fees for successful applicants.

Please include the following documents with your application:

- Student’s original Certificate of Eligibility and full-sized birth certificate (these will be copied while you wait and returned to you immediately).
- Copy for our files of student’s most recent school records (for Cycle One year 1 applicants, this means final Cycle 3 year 1 report and fall year 2 report if available).
- Passport-sized photograph of student

In certain cases, the administration may request an interview with the applicant and parents.

NOTIFICATION AND CONFIRMATION OF ACCEPTANCE OR REFUSALS

Candidates from JPPS and SSA who have successfully completed the application process before the deadline may be eligible for early acceptance. The school will notify qualifying candidates in writing as soon as possible. For all other candidates, acceptances will be sent between December 1, 2009, and December 4, 2009. Acceptances should be confirmed by parent(s), in writing, within 10 days of notification.

FEES

A copy of the current 2009-2010 Fee Schedule is included in the package. The school fees for 2010-2011 will be set by the Board of Directors, on recommendation of the Finance Committee in the spring of 2010. All fees are subject to change.

Fee Assistance Program: The academic admissions process and the Fee Assistance Program are entirely separate.

SUMMARY OF IMPORTANT DATES

DATE	PROCESS/EVENT
Wednesday, October 7, 2009 7:00 PM	Open House
Friday, November 6, 2009 2:45 PM	Deadline for Cycle 1, year 1 Application for Admission forms and \$250 registration fee/deposit
Friday, December 4, 2009	Latest date by which acceptances or refusals will be mailed



בתי ספר עממיים יהודיים ובתי ספר על שם פרץ
 LES ECOLES JUIVES POPULAIRES ET LES ECOLES PERETZ
 JEWISH PEOPLE'S SCHOOLS & PERETZ SCHOOLS INC.



EXECUTIVE OFFICE: 6502 Kildare Road, Cote Saint-Luc QC H4W 3B8 • Tel.: 514-731-3841 Fax: 514-731-0343

APPLICATION FOR ADMISSION

Please print clearly.

Date of application: _____ For academic year: _____

JPPS Tel.: 514-731-6456
 Applying to: **SEE**

Bialik High School Tel.: 514-481-2736

Bialik High School applicants only:
 Applying to: Hebraica Track Y N
 LEAP Section Française Y N

FAMILY INFORMATION

Family name: _____
 Father's name: _____
 Mother's name: _____
 Mother's maiden name: _____
 Address: _____
 _____ Postal code: _____

Home tel(s): _____
 Parent's title: _____ Marital status: _____
(Mr., Mrs., Ms., Miss) (Married, Divorced, Single, Widowed, Remarried)

Father's occupation: _____
 Work tel.: _____ Cell: _____
 E-mail: _____
 Father's licence plate #: _____
 Mother's occupation: _____
 Work tel.: _____ Cell: _____
 E-mail: _____
 Mother's licence plate #: _____

Responsible for School Fees:

Mother Father Both
 Non-resident parent Other _____

Non-resident Parent Information

Please complete where applicable.

Title: _____
 Last name: _____
 First name: _____
 Address: _____

Send mail: Y N

CHILD INFORMATION

Family name: _____ Given name: _____
 Student's cell: _____ Hebrew name: _____
 School previously attended: _____ Grade of entry: _____
 Sex (M/F): Birth date: _____ / _____ / _____ Birth place: Quebec
dd mm yy Other _____
 Mother tongue (E, F, H, Y...) Language at home (E, F, H, Y...)
 Permanent code: _____ Medicare #: _____ Exp. _____

EMERGENCY CONTACTS

Name: _____ Telephone: _____ Relationship: _____
 Name: _____ Telephone: _____ Relationship: _____

Office Use Only

Date received: _____ Family number: _____
 Admissibility certificate received: Y N Birth certificate received: Y N



Bialik High School Supplemental Information Form



Student's name: _____
Family name Given name(s)

Consent to Receive Information

We hereby give permission to _____ to release information to
(name of elementary or previous school)
 Bialik High School regarding our child.

 Parent's signature Date

Child Information

Previous Schools Attended

1. _____ from Grade _____ to Grade _____.
2. _____ from Grade _____ to Grade _____.

Does your child have a Certificate of Eligibility for English-Language education? Yes No

Has your child studied or have knowledge of: Yes No
Hebrew Yes No
Yiddish Yes No

Are you applying to the Hebraica Track? Yes No

Are you applying to LEAP? Yes No

(JPPS and SSA students only): Are you applying to the Section Française? Yes No

Applicants for Secondary II or higher: Does the student's present school know that you are exploring entry to other schools? Yes No

Quebec Medicare number: _____ / _____
(expiry)

Does the child take any medications or have any illness of which the school should be aware?

Other information about your child that may be helpful to the school or teachers:

Family Information

Please list all the children in your family:

Name	Age	Current School and Grade or Occupation	JPPS, SSA, or Bialik Graduate (Please indicate which school and year graduated)

Are you and/or your spouse a JPPS, SSA, or Bialik graduate? Yes No

If yes, please indicate year of graduation: _____ from (circle one) JPPS SSA Bialik

Would you like to be added to our alumni e-mail list? Yes No

If yes, please indicate your e-mail address: _____

Payment and Signature

Please attach payment of non-refundable \$200 fee by cheque payable to Bialik High School by November 6, 2009, or by credit card (complete bottom of this page).

Parent's signature_____
Date**Credit Card Information**

Payment by credit card of \$200 registration fee/deposit to Bialik High School before November 6, 2009.

 Mastercard VISA # _____ Expiry: _____ / _____
mo/yr_____
Cardholder's name (please print)_____
Cardholder's signature_____
Date

Educational Services Contract
for the 2010-2011 School Year

BETWEEN: Jewish People's Schools and Peretz School Inc. (hereafter indicated as "establishment"), a corporation duly constituted, holding a private school permit issued by virtue of the Loi sur l'enseignement privé, and having its main office at 5170 Van Horne, Montreal, Québec, H3W 1J6

AND: Name of parent or guardian _____
(hereafter indicated as "parent") responsible as parental authority for Name of student _____ (hereafter indicated as "student")
residing at complete Address _____

Conditions

The establishment commits to offer educational services at the preschool, elementary, or secondary level in English pursuant to the *Programme de formation de l'école québécoise* as set by the Ministère de l'Éducation, du Loisir et du Sport. The language of instruction is English. The school year begins on August 27, 2010, and ends on June 23, 2011.

The establishment commits to offer to the student, at the request of the parent, Jewish studies, which form an integral part of its educational program.

The establishment commits to provide the parent a copy of this contract prior to the beginning of the school year. It also commits to provide the parent, at the beginning of the school year, a copy of the regulations of the school (which can be found in the annual handbook at the Elementary and in the student's agenda at the Secondary), the activities calendar, the name of the student's teacher if the student is in preschool, or in the other cases, the names of all of the student's teachers as well as the name of his responsible person, if applicable.

The parent commits to pay to the establishment the fees for this contract by respecting the payment schedule in the Information on School Fees Package. He also commits to take notice of this contract and to ensure that the student respects the general rules of the establishment.

The parent commits to collaborate with fundraising and to participate with the volunteering activities organized by the establishment.

The parent is liable to follow the recommendations of the establishment in providing pedagogical or psychological support for the student, particularly in facilitating the integration of a student coming from another school.

The establishment may refuse admission or re-admission to a student who does not respect, or whose parent does not respect, the rules and regulations outlined in the contract. It may also refuse the re-admission of a student who no longer fulfils the eligibility criteria.

Financial Terms:

Compulsory fees:

Registration fees	\$ 200
Tuition fees	\$1,880
Contribution to the building fund (Based on a total contribution per family of \$1,800)	\$ 360
TOTAL	\$2,490

Jewish studies:

- Registration to Jewish studies

Tick off if service is retained:

Van Horne Campus (Elementary)

- Kindergarten \$4,370
- Elementary 1 \$5,120
- Elementary 2 \$5,120
- Elementary 3 \$5,120
- Elementary 4 \$5,120
- Elementary 5 \$5,120
- Elementary 6 \$5,290

Bialik High School (Secondary)

- Secondary I \$7,020
- Secondary II \$7,020
- Secondary III \$7,020
- Secondary IV \$7,170
- Secondary V \$7,510

Optional fees for additional services: (Tick off the retained services)

- Contribution to Home & School Association \$20 per Elementary family
\$30 per Secondary family
- Bus transportation service to Bialik High School from Dollard-des-Ormeaux \$1,200
- Extended Day \$200 per hour, per day
For the entire year
- Homework program \$15 per hour at the Elementary
\$17 per hour at the Secondary

TOTAL \$ _____

Terms of payment:

Excluding the registration fees, which are payable at the time of signing the contract, the parent must pay the amount due according to the schedule in the Information on School Fees Package.

Campus attended:

- Van Horne Campus (Elementary)
5170 Van Horne Avenue
Montreal, Québec
H3W 1J6
- Bialik High School (Secondary)
6500 Kildare
Montreal, Québec
H4W 3B8

The sections of the Loi sur l'enseignement privé that follow are an integral part of this contract:

70. No institution may require payment from a client before performance of its obligation has begun, except for the payment of an admission or enrolment fee not in excess of the amount determined in accordance with the regulations of the Minister.

No institution may require payment of the client's obligation, or balance thereof if admission or enrolment fees have been paid, in less than two reasonably equal instalments. The dates on which the instalments become due must be fixed in such a way that they fall approximately at the beginning of each half of the duration, calculated in months, lessons or credits, of the educational services for which the student is enrolled.

71. The client may, at any time and at his discretion, cancel the contract by giving notice to that effect by registered mail. The contract shall be cancelled by operation of law from the receipt of the notice.

72. If the client cancels the contract before the provision of services has begun, the institution cannot demand compensation in excess of the amount obtained by subtracting the admission or enrolment fees from the lesser of the following two amounts: the maximum amount determined in accordance with the regulations of the Minister, and an amount representing not more than 1/10 of the total price agreed upon for the services.

73. If the client cancels the contract after the provision of services has begun, the institution may demand only the following amounts from the client:

- 1) The price of the services provided calculated in months, lessons, or credits as specified in the contract;
- 2) as penalty, the amount obtained by subtracting the admission or enrolment fees from the lesser of the following two amounts: the maximum amount determined in accordance with the regulations of the Minister, and an amount representing not more than 1/10 of the total price agreed upon for the services.

74. In the ten days following the cancellation of the contract, the institution must return to the client the amounts it has received in excess of those to which it is entitled.

75. The client may demand that the contract be annulled if he becomes aware that the student was admitted to the educational services concerned in contravention of the provisions governing admission to those services.

76. No person may depart from the provisions of this chapter by means of an agreement which provides otherwise.

Furthermore, no client may waive a right conferred on him by this chapter.

Medical authorizations:

The parent that cannot be reached to give his consent authorizes the establishment, in the case of an illness or accident regarding the student, to provide the student with adequate treatment.

The parent commits to, in the case of an allergy to the student, respect the protocol of dealing with allergies established by the establishment.

The parent commits to, in the case of a chronic illness, provide the establishment with an emergency medical intervention plan, signed by a doctor.

The parent commits to inform the establishment of an allergy or chronic illness that may happen during the school year.

The parent authorizes the student to participate in all educational outings anticipated as part of the educational services.

The establishment commits to not deed, transfer, or sell this contract.

Accepted and signed in _____ (city), the _____ (date).

Parents Signature: _____

Establishment Signature: _____