



**Academy of Our Lady**  
**Regular Program Student Application Form 2024-2025**

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The *Academy of Our Lady* is a tutoring program that supplements a family-based homeschooling program. This application form is for students who are new to our Regular Program (Mon/Wed) or Extended Program (Tues/Thurs). New families with new student(s) should fill out the entire application. Returning families with new students should fill out the first and last pages. Please include all new students from the same family on the same application form (as Student #1, Student #2, etc.).

**Family Information**

Father: Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Phone: \_\_\_\_\_

Mother: Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Phone: \_\_\_\_\_

Legal Guardian(s) (if applicable): \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing address: \_\_\_\_\_ City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Religious affiliation: \_\_\_\_\_ Parish or church: \_\_\_\_\_

**Student #1**

Name: \_\_\_\_\_ Date of birth (M/D/Y) \_\_\_\_\_  Male  Female

Educational background:  Homeschooled (Grade(s) \_\_\_\_\_)  Attended Public/Catholic/Private School

School Name & City	Grade	Dates

Student is applying to be enrolled in grade \_\_\_\_\_ for 2024-25.

Has the student repeated a grade?  Yes  No      If yes, state grade \_\_\_\_\_ and reason:

\_\_\_\_\_

Does the student have any history of learning, emotional, physical, behavioral, or disciplinary issues?

Yes  No If yes, please state:

\_\_\_\_\_

Students resides with: (Check all that apply)

Father  Mother  Stepfather  Stepmother  Other: \_\_\_\_\_

**Student #2** (if applicable)

Name: \_\_\_\_\_ Date of birth (M/D/Y) \_\_\_\_\_  Male  Female

Educational background:  Homeschooled (Grade(s) \_\_\_\_\_)  Attended Public/Catholic/Private School

School Name & City	Grade	Dates

Student is applying to be enrolled in grade \_\_\_\_\_ for 2024-25.

Has the student repeated a grade?  Yes  No If yes, state grade \_\_\_\_\_ and reason:

\_\_\_\_\_

Does the student have any history of learning, emotional, physical, behavioral, or disciplinary issues?

Yes  No If yes, please state:

\_\_\_\_\_

Students resides with: (Check all that apply)

Father  Mother  Stepfather  Stepmother  Other: \_\_\_\_\_

**Student #3** (if applicable)

Name: \_\_\_\_\_ Date of birth (M/D/Y) \_\_\_\_\_  Male  Female

Educational background:  Homeschooled (Grade(s) \_\_\_\_\_)  Attended Public/Catholic/Private School

School Name & City	Grade	Dates

Student is applying to be enrolled in grade \_\_\_\_\_ for 2024-25.

Has the student repeated a grade?  Yes  No If yes, state grade \_\_\_\_\_ and reason:

\_\_\_\_\_

Does the student have any history of learning, emotional, physical, behavioral, or disciplinary issues?

Yes  No If yes, please state:

\_\_\_\_\_

Students resides with: (Check all that apply)

Father  Mother  Stepfather  Stepmother  Other: \_\_\_\_\_

**Student #4** (if applicable)

Name: \_\_\_\_\_ Date of birth (M/D/Y) \_\_\_\_\_  Male  Female

Educational background:  Homeschooled (Grade(s) \_\_\_\_\_)  Attended Public/Catholic/Private School

School Name & City	Grade	Dates

Student is applying to be enrolled in grade \_\_\_\_\_ for 2024-25.

Has the student repeated a grade?  Yes  No                      If yes, state grade \_\_\_\_\_ and reason:

\_\_\_\_\_

Does the student have any history of learning, emotional, physical, behavioral, or disciplinary issues?

Yes  No If yes, please state:

\_\_\_\_\_

Students resides with: (Check all that apply)

Father  Mother  Stepfather  Stepmother  Other: \_\_\_\_\_

(If applying for more than 4 students, please print copies of the previous page and add them to the application)

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**Further Information:**

Why have you chosen to homeschool? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What curriculum has your family used (if any)? \_\_\_\_\_

How did you hear about the Academy of Our Lady? \_\_\_\_\_

What are the reasons you are interested in enrolling your child(ren)? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please attach a paragraph from Regular Program students entering Grade 7 or higher indicating why they would like to attend.**

Who is a reference we may contact? This could include your parish priest, or a current member of the Academy of Our Lady program. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

The Academy is able to provide some financial assistance to families in need. Do you request financial assistance?  
\_\_\_ Yes \_\_\_ No \_\_\_ Maybe

To build our community and keep costs down, the Academy involves parent volunteers. Would you be willing to volunteer for 12-16 hours during the academic year? \_\_\_ Yes \_\_\_ No

What are your areas of volunteering interests and strengths? \_\_\_\_\_  
\_\_\_\_\_

Please note that the Academy of Our Lady reserves the right to accept students we see fitting the educational model and requirements of the program.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*All information on this application is considered by the school to be strictly confidential. Deliberate falsification or omission of any information may result in the removal of the students from the Academy of Our Lady.*

The application process will be considered complete upon the completion of an interview between the Academy of Our Lady staff and the students and both parents. Please bring this application form to your scheduled interview along with the application fee (cash, cheque, or prior etranfer to [office.ourlady@gmail.com](mailto:office.ourlady@gmail.com)).

**Application fees:** \$50 per new family with new students      \$25 per family currently enrolled with new students  
Families currently enrolled with no new students need not re-apply.

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For office use:

\_\_\_\_\_ Interview      \_\_\_\_\_ Fee      \_\_\_\_\_ Payment Method      \_\_\_\_\_ A/C      \_\_\_\_\_ Accepted