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Application for Admission High School for International Student (Grade Eight to Twelve)

Parent Application:

Confidential

Student Information:

Last Name:		
First Name:		
Date of Birth:		<input type="checkbox"/> Male <input type="checkbox"/> Female
Applying for Grade:		
S/he would like to do an Exchange with a WWS student	<input type="checkbox"/> Yes <input type="checkbox"/> No	
S/he is applying on a Homestay Visit basis	<input type="checkbox"/> Yes <input type="checkbox"/> No	
S/he will require a homestay family?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Parent or Guardian Information:

Parent/Guardian One

Last Name:	
First Name:	
Address:	
Email address:	
Phone:	
Cell:	
Work:	
Employer:	
Position:	

Parent/Guardian Two

Last Name:	
First Name:	
Address:	
Email address:	
Phone:	
Cell:	
Work:	
Employer:	
Position:	

Child Lives with Both Parents Parent 1 Parent 2 Other

Parent/Guardian Questionnaire

Why did you decide to provide an international exchange for your son/daughter?

Explain why you would like to have your son/daughter attend the Whistler Waldorf School.

What characteristics are you looking for in a High School?



How would you evaluate your son/daughter's command of the English language?

Which are his/her strongest areas of study in school?

Which are his/her weakest areas of study in school?

In what languages is your son/daughter fluent?

Will you be organizing additional English tutoring for son/daughter prior to their arrival in Canada?

Yes No

Has your son/daughter had any serious physical problems, diseases or traumas? If yes, please describe them and indicate when they occurred.

Is the student currently under any medical treatment? What kind? (traditional/ homeopathy/ anthroposophical/ other)?

Is the student currently receiving psychological or psychiatric treatment or have they received any such treatment in the last three years? If yes, please describe the type of therapy and reason it was sought and attached documentation if relevant

If the student has any emotional, disciplinary or learning challenges, please describe them.

What are the student's eating habits? Does the student have any food or other allergies? Is the allergic reaction life threatening? Please elaborate and describe symptoms

Please describe the student's sleep habits (usual bedtime, how many hours he/she sleeps, etc.):

Please describe any circumstances at home or among the student's relationships that might have produced negative effects in his/her personal life or school performance.

Describe your son/daughter's social relationships with friends, teachers, etc.



Do you know if your son/daughter has already taken any kind of recreational drugs (including tobacco or alcohol)? If so, explain.

Give your opinion regarding the use of recreational drugs by teenagers. What attitudes did you take or would you take if this happened? What attitudes do you expect the School to have in this regard?

Please include any information you think would help us support your son/daughter once they are enrolled (special abilities, interests, musical or artistic abilities, needs, temperament characteristics, etc).