Application Form



Agent:

Agency:

Email Address:

Student Information (Form must be completed electronically - in English)

Student's last name	Student's first name	Student's middle name
Student's mailing address (complete with street, city/town, province/state, postal code, and country)		Student's primary telephone
		Email address
Citizenship	Date of birth	Gender
		Male Female
Orientation T-shirt		
Size: small medium la	arge x-large	

School Information

How long do you plan to study in Canada?	Semester	Full Year	Other (please indicate)
Do you want to attain Nova Scotia High School	Credits?	Yes N	lo
When do you plan to begin your studies in Cana	ada:		
Current grade in home country:	Reque	ested grade	in Nova Scotia:
Do you plan to graduate from high school in No	ova Scotia?	Yes	No
Have you graduated from high school in your ho	ome country?	Yes	No
Do you require any special courses? Yes	No		
If yes please indicate:			
Name of the school you are currently attending:	:		
Level of spoken English: low fair	good	excellent	

Level of written English: low fair good excellent

Current Courses	Hours/course	Grade

Current Courses	Hours/course	Grade



Parent Information

Father's Information deceased

Last name	First name	Address (if different from student)
Birthdate	Occupation	
Home phone number	Business phone number	
Mobile phone number	Fax number	Email address

Mother's Information

deceased

Last name	First name	Address (if different from student)
Birthdate	Occupation	
Home phone number	Business phone number	
Mobile phone number	Fax number	Email address

Parents are (if applicable) separated divorced Who has custody/control of student?

Sibling Information

Full Name	Birthdate	Gen	der
		Male	Female

If more space is required please write on a separate page and attach.

Language Training



1. Have you had any English Second Language (ESL) training or participated in an ESL program?

Yes No If yes, what program: _____

Are you interested in attending ESL summer camp in Nova Scotia? Yes No

2. Please list the foreign languages you have studied.

Language	Years Studied	Language	Years Studied

Personal Data

Interests & Hobbies - Please list all current interests and hobbies.

Athletics - Please list all current athletic interests.

1. Who suggested that you participate in the Nova Scotia International Student Program and why?

2. What are your favourite courses in school and why?

3. Tell us about an achievement, award or special honour of which you are proud.

4. When you return home, will you:	continue educa	ation at your school	enter university	seek employment
What are your future career or job plan	s?			
5. Have you ever lived away from home	e? Yes	No		
Where		Date		
			to	
			to	
6. What are your household chores and	responsibilities?			

Health Questions

Have you ever had any of the following? Please select any that apply.

Failure to release accurate medical information may result in the termination of my program.

Appendicitis Asthma Celiac Disease Chicken Pox Cough (persistent) Diabetes Mellitus Dyslexia/Word Blindness Enuresis Goiter (Struma) Headache/Migraine Hepatitis Hernia Kidney Disease Learning Defect Malaria Measles Meningitis Mononucleosis Mumps Parasites Pneumonia Poliomyelitis Psoriasis Rheumatic Fever Rubella Scarlet Fever Seizure Disorder/Epilepsy Sleep Disorder Thyroid Disorder Tuberculosis Vertigo/Dizziness Other (please specify)

Have you ever experienced disease, impairment, or abnormality of any of the following?

- Abdominal Organs Bones, Joints Blood/Endocrine System Brain/Nervous System Ears or Hearing
- Eating Disorder Eyes or Vision Genito-Urinary System Heart or Blood Vessels Lungs/Respiratory System

Skin (acne, etc.) Tonsils/Nose/Throat Varicose Veins

If you selected any of the above, please provide details.

8. Do you have any allergies? (e.g. allergic to animals, food, or medications)	Yes	No
If yes, please provide details. (Please note, to ensure placement in a pet-free home, the NSIS confirm allergies to animals.)	SP requires a medio	cal note from your doctor to
9. Are you currently using any prescription drugs and/or medication? If yes, please provide details.	Yes	No
10. Are you currently under treatment for any medical or emotional conditions? <i>If yes, please provide details.</i>	Yes	No
11. Will you be taking any medication when in Nova Scotia? Yes If yes, please provide details.	No	



12. Have you had restriction of a physical activity in the last five years? <i>If yes, please provide details.</i>			Yes	No	Nova.Scotia International Student Program
13. Have you ever consulted a medical specialist? If yes, please provide details.	Yes	No			

14. Have you ever had any treatment or counselling for a nervous condition, personality disorder, or emotional problems?YesNoIf yes, please provide details.

Additional Questions

15. I confirm I have no known mental or physical health conditions not discolsed in the Health Section of this application. Yes No

16. Do you smoke?YesNoOccasionallyIf you respond yes, are you willing to live in a non-smoking home?YesNoDo your parents allow you to smoke?YesNo(signature required on page six)Please note: It is illegal for anyone under the age of 19 to purchase cigarettes in Nova Scotia.Nova Scotia.

17. I confirm I have no outstanding criminal charges or a criminal record in my country of residence.

Yes No

Attachments

Please ensure the following documents are attached:

- ✓ official school transcripts
- ✓ letter to your host family (a brief summary about you and why you are coming to Nova Scotia)
- ✓ activity waiver (attached at bottom)
- ✓ one passport photo
- ✓ copy of your passport
- ✓ photographs of you, family and friends (*please give brief descriptions*)
- ✓ \$400 CAD. application fee Non-refundable

Incomplete applications will not be processed.

PARTICIPATION TERMS

This section must be read and signed by you and your parent(s).

1. While in Canada I am always under the jurisdiction of the national, provincial, and local laws. I will obey all laws (shoplifting, stealing, harming others, etc.).



- 2. I will not purchase or consume alcohol or use illegal drugs while enrolled in the Nova Scotia International Student Program (NSISP).
- 3. I will obey the rules of my home stay. This includes any curfews, chores and other rules they have established.
- 4. I will obey the rules of the school I attend. These rules include, but are not limited to, attendance and actively participating in classroom work. I agree to take part in extra-curricular activities.
- 5. I will make every effort to speak English at all times.
- 6. I will not drive motorized vehicles except within the context of a formal driver's training program. Driver's training may be taken only with the written permission of my parents and I will allow the NSISP to hold my driver's license until I return to my home country.
- 7. **Travel within Nova Scotia**—I understand with the permission of my host family, I can travel throughout the province with them, a student group or other family.

Travel outside of Nova Scotia—I understand I require approval from the NSISP to travel outside the province with a group or my host family. All travel of this kind must be chaperoned by a responsible adult and requires written approval, in English, from my family. I will also advise the NSISP at least two weeks prior to my departure of my plans to travel.

- 8. I will make every effort to adjust to, and become a member of, the host family and community.
- 9. I understand my program fees cover my monthly charges for room, board, medical and tuition. Some schools charge all of their students an additional fee for such items as lockers, school agendas, etc. It is my responsibility to pay these fees which should cost between \$30-\$50.
- I understand visits by my family or friends from my home country are permitted no sooner than six weeks after my arrival in Nova Scotia. If my family or friends visit, they are responsible to make arrangements for their lodging outside the home of my host family.
- 11. I understand as a student in the NSISP any report about my participation (marks, behaviour etc.) can be sent to my parents and/or agent (if applicable).
- 12. I confirm information provided in this application is complete and factual, including any medical conditions relevant to my participation in the NSISP.
- 13. I consent to the use of my personal information for: (a) applying to the NSISP, (b) processing of my application, and (c) if I am accepted into the NSISP program, use of my information by the Nova Scotia school board and school where I will attend classes, as well as my host family.
- 14. I understand while enrolled in the NSISP a guardian will be assigned to me. The guardian is able to make decisions (ie, medical) and sign waivers (ie, skiing) on my behalf. The guardian will always use fair and reasonable judgment.
- 15. I also understand that pictures of me and/or testimonials that I write about the program maybe used for future marketing materials. This can extend past my participation in the program. These pictures may be used on, but not limited to, brochures and the Nova Scotia International Student Program websites/Twitter/Facebook or other social media.
- 16. The NSISP recommends students limit communication with their natural families and friends in your home country. This will help to ensure you enjoy a full cultural experience and stay engaged with the group. Upon arrival in the NSISP, you can contact your family and then it is recommended that you limit communication to once a week.

Program Termination: The NSISP reserves the right to terminate participation for the violation of program participation terms and/or when a participant's mental and/or physical health, as determined solely by the NSISP, is in jeopardy. Students who are expelled from the NSISP will not be given a refund or transcript.

I understand I am expected to follow and obey all the terms stated. I also understand if I do not, I will be sent back to my home country immediately at my own expense. I understand all matters relating to this contract will fall under the legal jurisdiction of the Province of Nova Scotia.

By signing this application, I represent that the information provided herein is complete and accurate to the best of my knowledge. I am alone responsible for the accuracy of the information provided, and any innacuracies may represent grounds for program termination.

Student's Signature:	 Date:	
Parent's Signature:	 Date:	

Please return signed application form with attachments to your NSISP country representative or mail to: Nova Scotia International Student Program, 60 Lorne Street, Truro, Nova Scotia, Canada, B2N 3K3 or fax to 1-902-896-5547. October 2014



Activity Waiver

Nova Scotia International Student Program

A consortium project of the Annapolis Valley Regional School Board, Cape Breton-Victoria Regional School Board, Chignecto-Central Regional School Board, Halifax Regional School Board, South Shore Regional School Board, Strait Regional School Board, and Tri-County Regional School Board in partnership with the Nova Scotia Department of Education and Early Childhood Development.

Dear Parent/Guardian of *[Name of Student]*:

School Board: _____

Study Dates: _____

During your son/daughter's participation in the Nova Scotia International Student Program (NSISP) he/she may take part in various activities either through their school, their host family, and/or their friends. These activities will be mainly cultural. However, some may be for entertainment. Your son/daughter will be transported to activities by bus, passenger van, host family vehicle, or public transportation. Activities organized by the NSISP or school board will follow the chaperone ratio set by their respective school board (1 adult to 10-15 students). Please note your child may not participate in all activities listed. The activities listed below are only examples of some activities available in Nova Scotia.

<u>Please read carefully.</u> This form must be signed and returned by the first day of attendance in the Nova Scotia International Student Program or your child will <u>not be allowed</u> to participate in the following activity(ies). By signing this form, you consent to your child's participation in the following activities and travel to these destinations:

- Camping
- Go-Karting
- Hiking
- Horseback Riding
- Mountain Biking
- Indoor Rock Climbing
- Sightseeing including land or water travel
- School and leisure sports (basketball, soccer, football, hockey, and others)
- School and social activities (attending dances, talents shows, concerts, get-togethers with friends, and others)
- Skateboarding
- Snow Sports (snowshoeing, skating, sledding, tubing, and others)
- Trampoline
- Water Sports (including swimming, boating, sailing, surfing, waterparks, visiting the beach, and others)
- Whale Watching
- Travel to other Canadian Provinces

Please Initial to Confirm Agreement



POTENTIAL KNOWN RISKS

Risk	Injury
Variable and unforeseen risks associated with recreational activities listed above including unforeseen circumstances, weather or water conditions, horseplay, collisions with moving or fixed objects, slips, falls, injury by an animal including but not limited to kicks from a horse, equipment failure or negligence on behalf of the operator, student failure to heed safety instructions, delayed rescue or accessibility, etc.	Head injuries, concussion, torn or damaged ligaments, broken bones, fractures, sprained joints, muscle injuries, cuts, scrapes, bruises, burns, hypothermia, drowning, quadriplegia, frostbite, sunburns, damaged eye sight, broken teeth, and/or other injuries including possible death
Travel to and from activity	Any injuries associated with a road vehicle accident including possible death

To participate in any activities, students must wear the appropriate safety clothing and equipment, including but not limited to, a CSA Approved Helmet and /or Life Jacket.

Higher risk activities such as skiing and river rafting will have individual permission forms required by the NSISP.

Our liability insurance providers have indicated that the following activities are higher risk activities in which students are not permitted to participate as school or program organized activities. We do recognize students may participate in these activities with their friends or host families and, if so, will be doing so at their own risk.

Higher risk activities include:

- Ziplining
- Paintball
- Driving All-Terrain Vehicles (ATVs)
- Snowmobiling

If you do not permit your child to participate in any of the above listed activities please indicate the activity(s) here:

Please Initial to Confirm Agreement

FOR ACTIVITIES ORGANIZED BY THE SCHOOL OR NSISP EVERY REASONABLE EFFORT WILL BE MADE TO ENSURE OR ASCERTAIN THAT:

- a. The staff, volunteers and/or service providers involved are suitably trained and qualified.
- b. The staff and volunteer chaperones have Child Abuse Registry checks and Criminal Records checks completed and on file.
- c. The students are adequately supervised during all aspects of the program/activity.
- d. The location(s) used are appropriate and safe for the activity(ies) and group.
- e. Equipment used has been inspected and deemed appropriate and safe.
- f. A Safety Plan is in place to identify and manage known potential risks.
- g. An Emergency Plan is in place to deal with an injury or illness to any of the students.



Parental Consent:

- 1. I/We accept the mode of transportation provided for the programs/activity(ies).
 - 2. I/We acknowledge my/our rights and responsibilities to obtain as much information as I/we require about this program/activity(ies) and associated risks and hazards, including information beyond that provided to me/us by the school or the Board.
 - 3. I/We freely and voluntarily assume the risks/hazards inherent in the program/activity(ies) and understand and acknowledge that my/our child may suffer personal and potentially serious injury arising from his/her participation.
- 4. I/We understand host families are volunteers in our program and are responsible to have insurance coverage themselves. Host families assume responsibility for my child's safety during family-organized activities.
- 5. My/Our child has been informed that he/she is to abide by the rules and regulations, including directions and instructions from the school's and/or service provider's administrators, instructors, and supervisors over all phases of the program/activity(ies).
- 6. In the event my/our child fails to abide by these rules and regulations, disciplinary action may require his/her exclusion from further participation.
- 7. I/We acknowledge that it is my/our duty to advise the Nova Scotia International Student Program Staff of any medical and/or health concerns of my/our child that may affect his/her participation.
- 8. I/We acknowledge that the Board may choose to cancel the trip if travel conditions are deemed unsafe (e.g., weather, health advisory, security).
- 9. I/We acknowledge that the trip supervisors may secure transport to emergency medical services as they deem necessary for my/our child's immediate health and safety.
- 10. Based on my/our understanding, acknowledgement, and consents as described herein, my/our child has my/our permission to participate in the program/activity(ies) provided.

Name of Student	
Name of Parent/Legal Guardian 1	Name of Parent/Legal Guardian 2
Signature of Parent/Legal Guardian 1	Signature of Parent/Legal Guardian 2
Date	Date

Personal information contained on this form is collected under the authority of the Nova Scotia Department of Education and Early Childhood Development for the purpose of participating in school trips. If you have any questions about this form, please contact the Director of your child's Regional School Board.