

# Mennonite Brethren Collegiate Institute

173 Talbot Avenue | Winnipeg, Manitoba | R2L 0P6  
204 667-8210 | Fax 204 661-5091 | mbc@mbc.mb.ca | www.mbc.mb.ca

## Application for Admission

For Grade \_\_\_\_ beginning September, 20\_\_\_\_

### How did you first hear about MBCI?

Family/Friend of MBCI  Newspaper/Flyer  Open House  Radio  Website  Other \_\_\_\_\_

### Student Information

Name \_\_\_\_\_  
Legal Last Legal First Legal Middle Name Commonly Used

Home Address \_\_\_\_\_  
Address City Province Postal Code

Home Phone \_\_\_\_\_ Gender: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Canadian Citizen:  Yes  No  
M/F year month day

MET# \_\_\_\_\_ Current School \_\_\_\_\_ Current Grade \_\_\_\_\_  
(from previous school or report card)

School Division \_\_\_\_\_ Applicant's Siblings \_\_\_\_\_  
(Division according to place of residence)

Name	Grade	Current School
_____	_____	_____
_____	_____	_____
_____	_____	_____

### Ancestral / Cultural Information

#### Providing this information is voluntary and optional.

The information is being collected to support the efforts of Manitoba Education and Training and schools to plan and improve programs in a way that is responsive to Aboriginal learners. It is being collected in compliance with section 36(1)(b) of the Freedom of Information and Protection of Privacy Act (FIPPA) as it is necessary for and relates directly to the activity of Manitoba and schools to plan, deliver and improve programs.

I, \_\_\_\_\_  Am submitting my child's Aboriginal Identity Declaration for the first time  
Name of parent/guardian  Am making changes to my child's Aboriginal Identity Declaration  
 Already submitted my child's Aboriginal Identity Declaration and have no changes to submit.

Please check only one of the following identities if applicable to your child: (These include Status and Non-Status Indians)  
 First Nation  Métis  Inuk (Inuit)

If you have selected an Aboriginal/Indigenous identity, please check up to two of the following cultural-linguistic identities that best describe your child:

<input type="checkbox"/> Anishinaabe (Ojibway/Saulteaux)	<input type="checkbox"/> Ininiw (Cree)
<input type="checkbox"/> Dene (Sayisi)	<input type="checkbox"/> Dakota
<input type="checkbox"/> Oji-Cree	<input type="checkbox"/> Michif
<input type="checkbox"/> Inuktitut	<input type="checkbox"/> Other _____ Please be Specific

### Office Use Only

Student # \_\_\_\_\_ Entered by Acctg \_\_\_\_\_ App Fee \_\_\_\_\_ Tuition Dep. \_\_\_\_\_ Rcpt # \_\_\_\_\_ Rcpt Mailed \_\_\_\_\_  
Received \_\_\_\_\_ Entered by Records \_\_\_\_\_ App Rc'd Ltr \_\_\_\_\_ Int Date \_\_\_\_\_ Decision Ltr \_\_\_\_\_

## Church Information

Family Church \_\_\_\_\_ Name \_\_\_\_\_ Address \_\_\_\_\_ Denomination \_\_\_\_\_

Is the student or any parent or guardian a member of a Mennonite Brethren Church?  Yes  No

Please specify church of Mennonite Brethren membership \_\_\_\_\_

## Medical Information

Family Doctor \_\_\_\_\_ Phone \_\_\_\_\_ Medical Number \_\_\_\_\_ / \_\_\_\_\_  
(6 digit) (9 digit)

Allergies \_\_\_\_\_ (Type) Life Threatening  Occasional

Symptoms of Reaction \_\_\_\_\_ Action Required \_\_\_\_\_

Medication \_\_\_\_\_ Being taken for: \_\_\_\_\_

Other relevant medical information: \_\_\_\_\_

## Signature

### Parents or Guardians:

I/We agree to partner with MBCI in the education of my/our child at MBCI by supporting the goals and principles of the school, ensuring the regular attendance of my/our child and meeting all financial obligations to the school.

Name \_\_\_\_\_ Date: \_\_\_\_\_ Signature \_\_\_\_\_

Name \_\_\_\_\_ Date: \_\_\_\_\_ Signature \_\_\_\_\_

## Parent or Guardian Information

### Father / Guardian

\_\_\_\_\_ Name \_\_\_\_\_ Address \_\_\_\_\_ Postal Code

\_\_\_\_\_ Home Phone \_\_\_\_\_ Bus. Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ E-mail

MBCI ALUMNUS  Yes  No

\_\_\_\_\_ MBCI Alumnus/Graduating Name & Year \_\_\_\_\_ Occupation \_\_\_\_\_ Employer

Father / Guardian

is fully financially responsible for the student.

is partially financially responsible for the student (\_\_\_\_%).

### Mother / Guardian

\_\_\_\_\_ Name \_\_\_\_\_ Address \_\_\_\_\_ Postal Code

\_\_\_\_\_ Home Phone \_\_\_\_\_ Bus. Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ E-mail

MBCI ALUMNUS  Yes  No

\_\_\_\_\_ MBCI Alumnus/Graduating Name & Year \_\_\_\_\_ Occupation \_\_\_\_\_ Employer

Mother / Guardian

is fully financially responsible for the student.

is partially financially responsible for the student (\_\_\_\_%).

## Student Information

### Check all that apply

Student's Parents:     Married             Divorced     Separated     Widowed  
Student Lives With:    Both Parents    Father         Mother         Stepmother    Stepfather    Guardian  
Student Custody:      Joint             Father         Mother         Stepmother    Stepfather    Guardian

**Note to divorced/separated parents:** School information will be sent to both parents unless sole custody can be documented or the second parent waives, in writing, the receipt of correspondence.

## Primary Email Contact Information

Preferred Family Email Address \_\_\_\_\_

## Emergency Contact other than Parent / Guardian

Name \_\_\_\_\_ Relationship to Student \_\_\_\_\_

Home Phone \_\_\_\_\_ Bus. Phone \_\_\_\_\_ Cell \_\_\_\_\_

## Additional Information

An application fee of \$50.00 must accompany this form. A representative from the Admissions Office will contact you on receipt of your application.

Entry into MBCI requires students, together with their parents or guardians, to participate in an interview. Interviews take place primarily in February and March and provide an opportunity for us to learn about each other and to gain an understanding of expectations.

Entry into MBCI requires that students write an essay, approximately 250 words in length, which should be brought to the interview.

*Essay Topic:*

Discuss an activity/person that/who has had a large impact on your life.

Admission notifications will be mailed within 3 weeks of the interview. Upon acceptance, a \$500.00 non-refundable tuition deposit becomes due, securing your placement at MBCI.

Tuition rates for the upcoming school year are listed in our school View Book and on our website.

Applications and cheques, made payable to MBCI, can be mailed to or dropped off at:

MBCI  
Admissions Office  
173 Talbot Ave.  
Winnipeg, MB R2L 0P6

***Thank you for applying to MBCI!***