



**PART B—PARENTAL/GUARDIAN INFORMATION**

**Parent 1/Guardian (in home country)**

**Parent 2/Guardian (in home country)**

\_\_\_\_ Mr. \_\_\_\_ Dr. \_\_\_\_ Prof. \_\_\_\_ Rev.

\_\_\_\_ Mrs. \_\_\_\_ Ms. \_\_\_\_ Dr. \_\_\_\_ Prof. \_\_\_\_ Rev.

Surname:	_____	_____
Given Name(s):	_____	_____
Street Address:	_____	_____
City:	_____	_____
Prov./Country:	_____/_____	_____/_____
Postal Code:	_____	_____
Tel: (Home)	_____	_____
Tel: (Work)	_____	_____
Cell/Alternate #	_____	_____
Preferred Email:	_____	_____
Profession:	_____	_____
Company:	_____	_____
Email Address	_____	_____

*(Fill out the section below if information is known at time of application. If living arrangements are not finalized at the time of application they must be finalized and known before the student can start attending classes).*

**Parent 1/ Guardian (in Manitoba)**

**Parent 2/Guardian(in Manitoba)**

\_\_\_\_ Mr. \_\_\_\_ Dr. \_\_\_\_ Prof. \_\_\_\_ Rev.

\_\_\_\_ Mrs. \_\_\_\_ Ms \_\_\_\_ Dr. \_\_\_\_ Prof. \_\_\_\_ Rev

Surname:	_____	_____
Given Name(s):	_____	_____
Street Address:	_____	_____
City:	_____	_____
Prov./Country:	_____/_____	_____/_____
Postal Code:	_____	_____
Tel: (Home)	_____	_____
Tel: (Work)	_____	_____
Cell/Alternate #	_____	_____
Preferred Email:	_____	_____
Profession:	_____	_____
Company:	_____	_____
Email Address	_____	_____

**PART C- FINANCIAL NFORMATION**

The person named here: \_\_\_\_\_ is fully financially responsible for taking care of financial arrangements and paying for the applicants tuition and any monies owed to the school (WMES Inc.).

**PART D- TRANSPORTATION NFORMATION**

We plan to: \_\_\_\_ Bus \_\_\_\_ Carpool/Walk      Closest crossing street to where student will live(if known): \_\_\_\_\_

*(continue on next page)*

**PART E—SIBLING INFORMATION**

Sibling  
Information

NAME	YEAR OF BIRTH	GRADE	CHECK IF ATTENDING WMEMS

**PART F—EMERGENCY INFORMATION**

Name and address of a friend or relative to be contacted in the event of an emergency where parents/guardians: contact cannot be made with the parent/guardian living with the student.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Alternate Phone(s): w: \_\_\_\_\_ c: \_\_\_\_\_

Allergies: \_\_\_\_\_  
(Please mark "**None**" if this is the case)

Special Medical Restrictions/Problems & Previous Illnesses: \_\_\_\_\_  
(i.e. asthma, epi-pen for allergies, heart conditions, diabetes, sight or hearing impairment, etc.- Please mark "**None**" if this is the case)

**PART G—Church Information**

**Family Church Information:** \_\_\_\_\_  
Name and Mailing address of family church (if applicable):

\_\_\_\_\_ Mennonite Church (check mark if applicable)      \_\_\_\_\_ Parents/Guardians are members of this Church (check mark if applicable)

**PART H—GENERAL INFORMATION**

How did you hear about WMEMS? \_\_\_\_\_

Why did you choose WMEMS? \_\_\_\_\_

The following documentation must accompany this completed **international student application form** in order for the application to be considered:

1. A recent photo
2. A \$220.00 per child Application Fee (nonrefundable)
3. The child's most recent progress report (not required for Kindergarten placement)
4. A copy of child's birth certificate.

(continue on next page)

