



Metropolitan Preparatory Academy

49 Mobile Drive • Toronto, Ontario • M4A 1H5 • (416) 285-0870

REGISTRATION – 2018/2019

STUDENT INFORMATION:

Student's Full Name: (Surname) _____ (First) _____ (Middle) _____

Application for Grade: _____ First Language: _____

Are you interested in the SMITH (School of Music, Integrated Arts, Theatre, & Humanities) program? Yes No

Date of Birth: (Day) _____ (Month) _____ (Year) _____ Gender Male Female

Present Address: _____

City: _____ Province: _____ Postal Code: _____ Home Telephone #: _____

Student Email: _____ Student Mobile: _____

Current School: _____ Current Grade: _____

Address of School: _____ School Phone #: _____

Religious Holidays Observed: _____

Future University Program Goal _____ (e.g. BUSINESS, ENGINEERING)

If Landed state the Entrance to
Country of Citizenship: _____ Canada: (Day) _____ (Month) _____ (Year) _____

Names & Ages of Brothers & Sisters: _____

How did you hear about Metro Prep Academy? _____

PARENT/GUARDIAN INFORMATION:

Student lives with: (Please Circle) Mother & Father / Alternating Mother-Father/ Mother / Father / Stepmother / Stepfather / Guardian

Mother's/Guardian's Name: (last) _____ (First) _____

Home Address: (if different from student's) _____

Home Telephone # : (if different from student's) _____ Mobile: _____

Mother's/Guardian's Employer: _____ Work: _____

Occupation: _____ Email: _____

Father's/Guardian's Name:(last) _____ (First) _____

Home Address: (if different from student's) _____

Home Telephone: (if different from student's) _____ Mobile: _____

Father's/Guardian's Employer: _____ Work: _____

Occupation: _____ Email: _____

NOTE: When returning this application, please include the following:

1. Deposit of \$2,000.00 (*non-refundable once your child has been accepted*).
2. \$225.00 entrance evaluation fee for students in grades 7 – 9.
3. Official copy of student transcript and most recent school report.

I/We agree to adhere to the rules of Metropolitan Preparatory Academy and to pay all school fees and incidental expenses. I/We understand that if the student withdraws or is expelled from the semester, there be will no refund of school fees. (Please note that this agreement is in effect for the student's entire tenure at Metropolitan Preparatory Academy).

DATE

MOTHER'S / GUARDIAN'S SIGNATURE

FATHER'S/GUARDIAN'S SIGNATURE



FEE SCHEDULE

\$10,980 per Semester

- a) Please note that the above fee includes the 2018-2019 yearbook.
- b) I/We agree to pay all tuition fees, deposits, dues, accounts, and other indebtedness incurred by the student or on the student's behalf while enrolled at Metropolitan Preparatory Academy. I understand that my obligation to pay the tuition fees for the full 2018/2019 academic year is unconditional. Further, no portion of such fees so paid or outstanding will be refunded or cancelled in the event of absence, withdrawal or dismissal of the above student from the school except as follows:

There can be no reduction in fees pertaining to the billing period in which a student is withdrawn.

- c) The fee installment for the second semester will be waived if notice of withdrawal is given in writing by November 10.
- d) Special consideration will be given in cases of prolonged absence due to medical reasons.

This form must be signed by the person/persons who will be responsible for payment of tuition fees plus any additional costs. If payment is to be divided this information must be provided in advance. Please note copies of legal documents may be requested.

(Please check the appropriate box)

- All billings to both parents
- All billings to father only
- All billings to mother only
- Other _____

Student's Name

Date

Mother's/Guardian's Signature

Father's/Guardian's Signature

.....
Photo Consent

Please note your child's picture will appear in the annual yearbook and may appear on the school website and other school social sites, in our newsletters and prospectus. All parents/guardians must accept this policy.



Metropolitan Preparatory Academy

49 Mobile Drive • Toronto, Ontario • M4A 1H5 • (416) 285-0870

Code of Conduct

[Revised August 2016]

We at Metropolitan Preparatory Academy are committed to providing a safe and healthy learning environment for all our students. Students are expected to:

- demonstrate a commitment to learning through punctual and regular attendance, being prepared and ready to learn. This includes the submitting of all assignments and the writing of all tests, on time.
- dress in accordance with the school dress code.
- respect the authority of school staff.
- follow classroom rules and take responsibility for their own actions.
- demonstrate honesty and integrity. Not to participate in plagiarism, misrepresentation of original work, the use of unauthorized aids, nor the theft of evaluation instruments.
- treat one another with dignity, respect and fairness, regardless of race, culture, ethnicity, religion, gender, gender identity, sexual orientation, age, socioeconomic status, ability or any other attribute.
- refrain from bringing anything to school, or using anything inappropriately, that may risk the safety of themselves or others.
- refrain from the use of all electronic devices, which include cell phones for texting and verbal communication during class time.
- refrain from smoking on school property or while attending any school related event or activity.
- refrain from the possession of, and being under the influence of alcohol or drugs.
- refrain from the possession of any form of a weapon.
- avoid all forms of intimidation, harassment, racism, and discrimination.
- refrain from bullying behaviour, which is considered to be any repeated, negative behaviour intended on causing fear, distress and or harm to another person's body, feelings, self-esteem or reputation. This includes cyber-bullying.
- take appropriate action to help those in need, seeking assistance to resolve conflict constructively and respectfully through discussion or by seeking assistance from school personnel.
- treat school property and the property of others with a reasonable standard of care.
- refrain from taking articles which do not belong to them.
- express themselves with socially acceptable language and gestures that contributes to an orderly and safe learning environment.

Parent and guardians are expected to:

- review the above Code of Conduct with their child and help him/her to follow the school/classroom rules.
- take an active role in the education of their child and ensure that he/she is punctual and attends school regularly.
- report to attendance personnel if their child will be arriving late or will be absence from school.



School/Classroom Rules

1. Students are expected to be punctual for classes. If late, students must obtain a late slip to enter class.
2. Attendance is mandatory. After fifteen illegitimate absences a credit for the course will not be granted. Each three lates is considered one absence. [Legitimate absences include religious holidays, doctor or dentist appointments, Metro Prep sports events, or Metro Prep school trips].
3. Students who are absent from class are expected to get missed notes from a fellow classmate.
4. Skipping will result in disciplinary action which may include detention or suspension.
5. A student wishing to be dismissed early from school must sign out at the attendance office. Sign outs require parental permission.
6. To leave a class, students must ask the teacher for permission. Only one student at a time is allowed to leave the classroom to use the washroom.
7. Students are not allowed to freely roam the classroom. To leave one's seat to put something in the garbage or sharpen their pencil, a student must ask the teacher for permission.
8. Students, who are on spare, must refrain from roaming the hallways. They are to be in the library or in the upstairs study area doing homework, the cafeteria or outside. Students are not to interrupt classes.
9. Due to food allergies, students are not allowed to eat or drink in the classrooms and study areas. Eating is only allowed in the cafeteria and on the outdoor picnic tables.
10. Students must be responsible for their books, backpacks and contents. Students are supplied with a locker and are expected to use them. Do not leave your books and backpack in the hallways or in an unlocked room. The school will not be responsible for any loss or theft of personal belongings.
11. Although there are no uniforms, students are requested to keep a reasonable standard of dress. Dirty, ragged, ripped or torn clothing shows no self respect and will not be tolerated in the school. T-shirts with obscenities printed on them are not allowed.
12. No hats are allowed in the classroom. They must be removed immediately upon entering.
13. Students must purchase and wear our gym uniform during physical education classes.
14. All cell phones must be turned off while in class. If there is an emergency and a parent needs to speak with their child they may call the school and we will get the message to the student. A student caught texting during class time will have his/her phone confiscated.
15. Students are not allowed to use their phones during class (exception in the art studio when the teacher gives permission to listen to music). No ear buds can be worn during class. A student caught using his/her phone will have it confiscated.
16. Students may use a laptop or tablet to take down class notes. If found playing games or watching movies etcetera the student will not be allowed to bring the laptop to class.
17. Plagiarism will not be tolerated and will result in a zero.
18. Students who fail to hand in an assignment when due, will received 5 % off each day late. Some assignments will have no grace period, since they are immediately taken up in class. With these types of assignments the student will receive a zero. If a student misses a test, the student must make arrangements with the teacher to write the test.
19. Credits will not be granted to students unless they write the final examinations and achieve over 40%. If a student misses a final examination due to illness, a doctor's note must be received or the student will receive a zero.
20. For the respect of others, please do not use foul language in the school.
21. For the respect of others, please keep classrooms and washrooms clean.
22. Bullying will not be tolerated. In general, your behaviour should show respect and consideration for others, both adults and peers.
23. Any student who damages or is caught stealing school property will be punished and will be required to replace the damaged or stolen articles.
24. There is to be absolutely no smoking on school property. Students will be suspended.
25. Alcohol and illegal drugs are strictly forbidden. Students who come to school with illegal substances or in an impaired state will be immediately suspended and the police will be notified.

This will confirm that I have read and understand the Code of Conduct and School Rules of Metropolitan Preparatory Academy.

Student's Signature

Date



MEDICAL PROFILE

Student's Name: _____

Date of Birth: Day _____ Month _____ Year _____ Gender: Male Female

Student's Health Card Number: _____

IN CASE OF EMERGENCY – PLEASE NOTIFY

Father (Name) _____ Mother (Name) _____ Guardian (Name) _____

Telephone # () _____ () _____ () _____

Alternate Contact (if parents/guardian cannot be reached)

Name: _____ (Relationship to Student) _____ Telephone #: () _____

MEDICAL HISTORY

Please check each of the following, if your child has or has had.

Table with 3 columns: Condition, YES, NO. Rows include Epilepsy, Diabetes, Heart Trouble, Asthma, Ulcer or stomach problems, Previous Back injury, Kidney disease, and questions about psychiatric care and prescription medication.

Any other medical condition we should be aware of:

Allergies, If yes, please indicate type in space below: _____

If allergic to foods or insect bites, does your child carry an EpiPen?

Immunizations are Up-To-Date.....

(Please note at age sixteen, students should have had a booster shot for tetanus, diphtheria and pertussis)

Date _____ Parent's/Guardian's Signature _____



O.S.R. TRANSFER REQUEST FORM

**MUST BE RETURNED IF A STUDENT WILL BE ATTENDING
METROPOLITAN PREPARATORY ACADEMY**

Student's Name: _____

Date of Birth: _____
Day Month Year

Home Address: _____

City Province

Postal Code

To Whom It May Concern:

The Ministry of Education requests that schools obtain written permission from parents/guardians for the transfer of student records from one school to another.

I hereby give my permission for Metropolitan Preparatory Academy to obtain the Ontario School Record for the above student.

Date

Parent/Guardian Signature

School Last Attended _____

School Address: _____

City Province

Postal Code

School Telephone: () _____

School Fax: () _____

Thank you,

Metropolitan Preparatory Academy