



Rosthern Junior College

RETURNING STUDENT APPLICATION 2017-2018

Name in Full _____ Date _____
 First Middle Last (Surname)

Returning for Grade _____ Are you applying to live in residence? Yes _____ No _____

Any changes to personal information? Yes _____ No _____

Home Address _____

Home Phone _____ Student Cell Phone # _____

Parent Email _____ Student Email _____

Welcome back! Briefly tell us why you are returning to RJC: _____

Tell us one thing you would like to improve on to make this year better: _____

Do you have any new health or dietary concerns that the school, residence or kitchen staff need to be aware of:

Are you presently on any medication? Yes _____ No _____

If yes, please specify:

Do you fully understand all of the policies of RJC?

Including: Smoking, drinking, resident life, dress code and attendance? Yes _____ No _____

Are you willing to support and uphold the policies and guidelines? Yes _____ No _____

Your signature below indicates your commitment to RJC and its policies and your desire to respond accordingly.

 Signature of Student

 Date

Your signature on this form indicates your support of our program and of your child attending RJC according to the understandings above. **Your signature** also indicates consent for your child to participate in the regular curricular and extra-curricular activities that constitute RJC's programming both off and on campus. Last, **your signature** indicates your responsibility for full payment of fees.

 Signature of Parent (Guardian)

 Date

**A non-refundable registration fee of \$150 and a completed Fee Schedule
 needs to be received before application can be processed.
 The deadline for financial assistance requests for returning students is May 15, 2017.**

Rosthern Junior College

Box 5020 Rosthern, SK S0K 3R0 Phone: (306)232-4222 Fax: (306)232-5250
 email: office@rjc.sk.ca admissions@rjc.sk.ca website: rosthernjuniorcollege.ca

Revised Jan 2017