

APPLICATION FOR ADMISSION

2025/2026

PLEASE NOTE: THIS APPLICATION DOES NOT GUARANTEE ENROLLMENT.
VICTUS ACADEMY RESERVES THE RIGHT TO ADMIT OR DECLINE APPLICANTS ACCORDING TO ITS ADMISSION POLICIES.

APPLICATION FOR GRADE: 5 6 7 8 9 10 11 12					
STUDENT ATHLETE INFORMATION					
FAMILY NAME					
GIVEN NAME	MIDDLE NAME				
DATE OF BIRTH	GENDER				
ADDRESS	СІТУ				
POSTAL CODE					
CURRENT HOCKEY TEAM & LEVEL	HOCKEY POSITION				
ACADEMIC AVERAGE					
MEDICAL HISTORY (Injuries, Allergies, Other Challenges)					
PARENT/GUARDIAN INFORMATION					
NAME OF PARENT/GUARDIAN	NAME OF PARENT/GUARDIAN				
RELATIONSHIP	RELATIONSHIP				
HOME PHONE	HOME PHONE				
MOBILE PHONE	MOBILE PHONE				
EMPLOYER/OCCUPATION	EMPLOYER/OCCUPATION				
ADDRESS (if different than student)	ADDRESS (if different than student)				
EMAIL ADDRESS	EMAIL ADDRESS				
SCHOOL INFORMATION					
CURRENT SCHOOL NAME					
PRINCIPAL'S NAME	ACADEMIC ACHIEVEMENTS				
STUDENT HAS AN IEP: YES NO	IF YES, PLEASE ATTACH A COPY WITH SUBMISSION INFORMATION				



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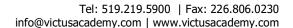
		REF	ERENCES		
Please pro	ovide the co	entact information for a teacher/	principal, acade	emic, and athletic reference OR you may	
attach ref	ference lette	er(s).			
TEACHER/PI	TEACHER/PRINCIPAL NAME		GRADE/SUBJECT	CONTACT NUMBER OR EMAIL ADDRESS	
ACADEMIC REFERENCE			CONTACT NUMBER OR EMAIL ADDRESS		
			CONTROL NUMBER OF START APPREC		
ATHLETIC RE	EFERENCE			CONTACT NUMBER OR EMAIL ADDRESS	
		FINANCIAL INFORMA	TION – PAYM	IENT OPTIONS	
	P	AYMENT IN FULL		10 EQUAL MONTHLY PAYMENTS	
		PI	ROCESS		
YES	NO	I/WE AGREE TO THE TRANSFER			
VEC	NO			PTED (See attached OSR Request Form)	
YES	NO	UNDERSTAND THE POLICIES IN		ON AND HAVE RECEIVED, READ, AND OKS PROVIDED TO US	
YES	NO			\$2000 REGISTRATION FEE. THIS DEPOSIT	
	WILL BE DEDUCTED FROM THE TUITION FEES FOR THE YEAR IF THE APPLICATION FOR				
		ADMISSION IS ACCEPTED.			
YES	NO	I/WE ACCEPT THE FINANCIAL F	RESPONSIBILITIE	S FOR TUITION AND OTHER FEES.	
	010				
	SIG	NATURES OF STUDENT/AP	PLICANT AND	PARENTS/GUARDIAN	
ACKNOWLEI Procedures I	DGE HAVING R <i>Manual</i>) AND I	ECEIVED, READ, AND UNDERSTAND THE	CURRENT POLICIES	O ATTENDANCE, BEHAVIOUR, DISCIPLINE AND DRESS CODE. I IN EFFECT (outlined in the <i>Student Playbook</i> and <i>Policies &</i> FOLLOWED AS A CONDITION OF MY CONTINUED ENROLLMENT	
STUDENT SI	GNATURE		DATE	DATE	
IN FULFILLIN	NG THE PURPO LICIES IN EFFEC PLIANCE BY MY	SE AND MISSION OF THE SCHOOL. I/WE T (outlined in the <i>Student Playbook, Par</i>	ACKNOWLEDGE HArent Handbook, and	US ACADEMY AND WILL SUPPORT HIM/HER AND FACULTY AVING RECEIVED, READ, AND UNDERSTAND THE CURRENT Policies & Procedures Manual), AND ACKNOWLEDGE AND AGILD'S CONTINUED ENROLLMENT AT VICTUS AND THAT THEY A	
PARENT/GU	JARDIAN SIGNA	ATURE	DATE		
PARENT/GUARDIAN SIGNATURE		DATE			



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SUBMISSION CHECKLIST				
PLEASE COMPLETE AND RETURN:				
☐ THIS APPLICATION FORM IN ITS ENTIRETY				
☐ A NON-REFUNDABLE DEPOSIT OF \$2000 (WHICH WILL BE APPLIED TOWARDS TUITION UPON ACCEPTANCE)				
- E-transfers made payable to payments@victusacademy.com				
- Cheque made payable to Victus Academy				
☐ A COPY OF THE STUDENT'S MOST RECENT 2 REPORT CARDS AND HIGH SCHOOL TRANSCRIPT (if applicable)				
☐ A COPY OF THE STUDENT'S ACADEMIC IEP (if applicable) or ANY OTHER ACADEMIC INFORMATION				
AND RETURN TO:				
VICTUS ACADEMY ADMISSIONS				
35 SPORTSWORLD CROSSING ROAD				
KITCHENER, ON				
N2P 0A5				
admissions@victusacademy.com				





Sportsworld Arena | Mailing Address: 35 Sportsworld Crossing Road, Kitchener, On N2P 0A5

OSR Request Form To be filled out by family Outgoing School: ______, ON Registrar Phone number: Registrar Email address: Please forward the Ontario Student Record (OSR) for: Surname First Middle who has enrolled in Grade _____ at: **Victus Academy** 35 Sportsworld Crossing Rd Telephone Number: (519) 219-5900 Kitchener, ON School MIDENT #: <u>669153</u> N2P 0A5 September 2, 2025 Starting on: Parent Signature Date To be filled out by Victus Academy Administration: I hereby agree to accept responsibility for the record and to use, maintain, transfer, and dispose of the record in accordance with the Ontario Student Record (OSR) Guideline, 2000. Principal Signature Date

OSR Received Date:

OSR Request Date: