



ST. JUDE SCHOOL

2953 East 15th Avenue
Vancouver, BC V5M 2K7
(604) 434-1633 Fax: (604) 434-8677
Email: stjude@shawcable.com

FAMILY STATEMENT OF COMMITMENT

Family Name: _____

Oldest Child: _____

Philosophy

"Motivated by a Christian-centered vision of humanity and human history, our school promotes the formation of the whole person. Such formation embraces not only intellectual, but also physical, emotional, moral and spiritual dimensions of human growth. Intellect, emotions, creative ability and cultural heritage have a place in the life of the school. Human knowledge and skills are recognized as precious in themselves, but find their deepest meaning in God's plan for creation.

*-- from **Philosophy of Education from Catholic School in the Province of B.C.** by the Catholic Bishops of B.C.*

Partners (home, school, parish) in Catholic Education must work together to provide an environment where faith and learning go hand in hand leading the young people to be the best they can be.

The following statements support the goals and philosophy of our Catholic school and need to be accepted and supported by all members of the community. **Read them carefully. They ask you to make a commitment to the values and ideals of our school community. If you have any questions or concerns regarding this commitment form, please bring them to the Principal, Pastor or the Chairperson of the Education Committee who will gladly discuss them with you.**

By returning the signed statement with your completed application form, you accept the responsibility of this Commitment:

1. Parents and guardians agree that they and their families will exhibit conduct consistent with Catholic denominational standards. The determination of whether any conduct contravenes the standards is the right of the Board of Directors of the Catholic Independent Schools of the Vancouver Archdiocese.
2. All students are required to participate in our religious education curricular and co-curricular program including liturgical celebrations, retreats and prayer among others.
3. Parents/Guardians are expected to support the Religious Education Program and participate in it as required including mandatory parent information evenings for First Confession and Communion (Grade 2) and Confirmation (Grade 7).
4. Regular school attendance and full participation in all aspects of the academic program of the school are required of every student. Each student is expected to strive toward the development of full academic potential.
5. Each family is expected to support and participate in the fundraising activities of the parish/school. This means each family shares in the responsibility of educating our Catholic children.
6. Each student is expected to know and follow school policies on behavior.
7. Parents/Guardians are expected to know and support school policy and procedures.
8. Parents/Guardians are expected to attend at least one orientation session which will focus on the philosophy and goals of our school. In addition, there is one mandatory parent information evening per year in the area of the Health and Career Education curriculum for parents of students in Grades 4,6 and 7.
9. Parents/Guardians agree to accept the responsibility for the cost of tuition, supplies and other school activities.

If any of these conditions are not met, St. Jude School reserves the right to:

- **Refuse admission**
- **Remove the student from the school**

Please sign BOTH copies. Keep one and return the other with your application.

I have read and understand the above expectations and commitments and I hereby accept them.

Signature Parent/Guardian: _____ (Date)



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Signature of Parent/Guardian: _____

Family Copy

(Date)



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UNIFORMS

It is the responsibility of the parents to ensure that each child wears his or her complete school uniform to school each day (unless directed otherwise by a staff member).

GIRL'S UNIFORM:

Forest green/navy plaid kilt
(A jumper is optional for primary students)
White school golf shirt
Green pullover school sweater
Navy blue knee-high socks or tights
Black shoes (NO HIGH TOPS - top of shoe must be below ankle)
Forest green, navy, black or white hair bands, barrettes or ties

BOY'S UNIFORM:

Navy blue school dress pants
White school golf shirt
Green pullover school sweater
Navy socks
Black shoes (NO HIGH TOPS – top of shoe must be below ankle)

OPTIONAL SUMMER UNIFORM

Can be worn from May 1st to October 14th

Navy school walking shorts
Green pullover school sweater
White golf shirt
Navy blue socks
Black shoes (NO HIGH TOPS – top of shoe must be below ankle)

Gym Uniform.

St. Jude black mesh shorts
St. Jude grey t-shirt
Runners and white gym socks

Uniform Notes:

*All prescribed clothing items are purchased at our uniform supplier, **Neat Uniforms.**

Skirts must be of reasonable length (just above the knee).

Hair should be kept clean and tidy. All hair ornaments must be in school colors

Jewelry is not acceptable with the uniform. Girls may wear simple stud earrings.

All articles of clothing, shoes and school bags, must be labeled clearly with child's name.

Please label all uniform items clearly on the inside of garments. Visible monogramming of uniform items is not allowed (safety reasons).

Please check the identification throughout the year as labels fall off and names fade.

**Neat Uniform is located at 1050 Boundary Road, Burnaby, BC, Tel. 604 205 7560*

June 5 – 11, 2011 is Focus Week for St. Jude School at Neat Uniform. You will receive a 10% discount if you shop at that time.



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Computer and Internet Use Agreement ~ Parent and Students

With internet access to information from all over the world also comes the availability of material that may not be considered to be of educational value. The teachers at St. Jude School take precautions to restrict access to controversial materials by having a content filter installed on each computer. For information about how this filter works, please visit the following web site: <http://www.s4f.com>. However, on a global network it is impossible to control all materials and an industrious user may discover controversial information. If a student chooses to access resources that are objectionable or restricted, the consequences will be suspension of access and/or other disciplinary action.

Saint Jude School offers Internet access to students as a privilege; these services are not a right. Successful operation of Information and Communication Technology (ICT) requires that all users conduct themselves in a responsible, ethical and polite manner. The use of the school's computers must be in support of education or research and consistent with our Catholic Christian values.

- ✓ Access to computers is provided to students as a tool to complete school related projects and assignments only.
- ✓ Students may not install or download software, games or chat. Only software licensed to the school may be used on any school computer.
- ✓ Deletions, additions or any modifications to the Windows desktop are not allowed. Users may not modify any hardware or operating system settings that would change the appearance or operation of the computer network.
- ✓ Students must respect the work of other students and faculty by not accessing, modifying, or deleting the files of others.
- ✓ Optical scanners and printers are for use directly relating to school assignments only. Students may not scan or print any other materials.
- ✓ Students must respect copyright laws that protect software owners, artists, and writers. Plagiarism in any form will not be tolerated. This applies to all forms of electronic media including electronic encyclopedias, image files, and sound files. The author of such files MUST be acknowledged (your teacher will tell you how to do this).
- ✓ While using computers, students must at all times use polite and respectful language consistent with our Catholic Faith.
- ✓ If students accidentally come across restricted, offensive or dangerous information they must immediately remove it from the screen without showing other students. They must notify their supervising teacher at once.
- ✓ Students may not use school equipment to access their own Internet Provider, Online Service, personal e-mail or social networking (e.g. Facebook)
- ✓ Food or drink must not be consumed in the lab or within one meter of classroom computers.
- ✓ Internet use at school will at all times be supervised, monitored or restricted according to the policies for student safety outlined by the Administration.

Violation of any of the regulations above may result in disciplinary actions that include removal of all computer privileges, suspension or expulsion.



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Computer and Internet Use Agreement ~ Parent and Students Signatures

STUDENTS

I have read the Computer and Internet Use Rules Agreement, and I know what the school rules are about the use of computers and the Internet. I know that if I break these rules there will be serious consequences:

- ✓ I might lose the privilege of using a school computer
- ✓ The school may also take disciplinary action against me.

Student's Name: _____

Student's Signature: _____

Grade: _____ Date: _____

PARENTS

I have read the Saint Jude Computer and Internet use Rules and Agreement and I understand that there may be severe consequences if the rules are broken. I have gone over the information with my child and explained its importance. I also understand that theft or damage to equipment could result in the home receiving a bill for the cost of replacement parts or repairs.

I understand that while the school will do its best to restrict student access to offensive, dangerous or illegal material on the Internet, it is the responsibility of my child to have no involvement in such material.

I give permission for my child _____ to be given access at school to the Internet.
Full Name (please print clearly)

Name of Parent/Legal Guardian: _____
(please print clearly)

Signature: _____

Date: _____



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PARENT PARTICIPATION PROGRAM FORM 2011-12

(This application must be filled out by all families, whether participating or not in the program).

CHILD'S (REN) LAST NAME: _____

HOME PHONE: _____ CELL PHONE: _____

FATHER'S FIRST AND LAST NAME: _____

MOTHER'S FIRST AND LAST NAME: _____

NAME OF YOUNGEST CHILD IN ST. JUDE: _____

OLDEST CHILD'S GRADE IN September 2011: _____

EMAIL ADDRESS: _____

PARTICIPATING: _____ NON-PARTICIPATING: _____

Parent participation is essential to the orderly operation of St. Jude's School. Parents contribute to many aspects of the daily functions of the school such as maintenance, lawn and garden upkeep, painting, supervision of students, fundraising, etc. Without parents' cooperation, the school could not function well. It is therefore essential that you fully understand your obligation. It is necessary that one parent per family participate. To fulfill your commitment to the Parents' Participation Program, each family is required to work 50 hours/year (25 hours in the first half of the school year and 25 hours in the second half.)

The Parents' Participation Form must be completed and returned together with the Participation Deposit (two \$400.00 cheques) upon registration. One cheque is to be dated February 1, 2012 and one is to be dated June 1, 2012 (See Information Sheet for further details).

Please note: Parents may not necessarily be assigned to the Category they prefer. Assignment is based on school needs. Requests for exemptions from the Parents' Participation Program must be made to the Pastor.

Parent help is required in the following areas. Please refer to the *Parents' Participation Program Guidelines* for detailed information about expectations in each category.

Please indicate 3 areas of interest and number your preference from 1 to 3.

Section 1 **MAINTENANCE**

Yard cleaning, lawn cutting, painting, and anything relating to maintaining and improving the physical plant. Maintenance is scheduled year-round from July 1 – June 30. Regular work times are Monday & Thursday 8am – 4pm and Saturday 8am – 12 Noon. Please indicate your preference

Monday **Thursday** **Saturday**

If you are skilled in a particular trade, please note it here:

Section 2 **SPECIAL EVENTS / FUND-RAISING**

Help with special events/activities/projects such as the Walkathon, Spring Barbecue, Breakfast with Santa etc. This help may include set up / clean up, phoning and coordinating volunteers, promotion of events in community etc.

Section 3 **CLASS PARENT GRADE (S)** _____

Helping classroom teacher in various ways. An orientation session may be required by the classroom teacher.

Section 4 **YARD/CLASSROOM SUPERVISION** (Attendance at September orientation is required.)

Help is required from September to June. Check time/day

	Monday	Tuesday	Wednesday	Thursday	Friday
8:10am-8:50am					
11:45am-1:00pm					
2:45pm-3:25pm					



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Section 5 **CHOIR/ACCOMPANIST (PIANO)**

Section 6 **Coaching Assistance/Refereeing/Extra-Curricular** *(A good knowledge of a particular sport and a desire to work with children are pre-requisites. Please check the sport/extra-curricular activity you would like to assist with.)*

Coaching **Refereeing**
 _____ **Cross Country** _____ **Volleyball** _____ **Basketball** _____ **Track and Field**

Section 7 **COMPUTER ASSISTANCE** *(Assist with servicing/trouble shooting and cleaning computers in students' lab. Also, desktop publishing, website design/maintenance etc.)*

Section 8 **EMERGENCY PREPAREDNESS (Maintaining lists,**

Section 9 **HOSPITALITY** *(setting up for school special events, preparing coffee and tea)*

Section 10 **HOT LUNCH** *(must be available at lunch time)*

Section 11 **LIBRARY** *(Assistance required September to June. Help is needed mornings, afternoons and lunch times. Please specify times that you are available i.e. 8:45 – 10:30 Monday-Friday)*

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning Time					
12:00-12:45pm					
Afternoon Time					

Section 12 **PUBLIC RELATIONS AND PARISH LIAISON**

Section 13 **RECYCLING** *(Maintaining school's recycling program)*

Section 14 **SECRETARY/OFFICE SUPPORT**

Section 15 **SCHOOL MILK PROGRAM** *(once per week at lunch time)*

Section 16 **OTHER WAYS TO ASSIST SCHOOL** _____
PLEASE SPECIFY

N.B. Tell us about any special talent you have that might be useful to the school: musical, artistic, drama, photography etc.

Section 17 **CISVA Teacher** *(Attach exemption form available at the office.)*

Section 18 **I am not able/don't wish to participate in the Parents' Participation Program this year and will pay a \$600.00 Non-Participation Fee in lieu of participation. (Payment can be monthly or lump sum)**

I acknowledge that I have read, understood and agree to abide by the Parent Participation Policy as outlined in the Parent Handbook.

I understand that if I do not fully meet my 50-hour commitment as a family (i.e. 25 hours from July to January and 25 hours from February to June), my Non-Participation Deposit cheque will be forfeited.

Parent's Signature: _____ Date: _____



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Father's Last Name: _____ Father's First Name: _____ Cel # _____

Mother's Last Name: _____ Mother's First Name: _____ Cel # _____

Home Phone: _____ Family Parish: _____ Envelope # _____

Child(ren) registered at St. Jude School for 2011-12

Child's Name _____ Grade _____

Child's Name _____ Grade _____

Child's Name _____ Grade _____

Income Tax Receipt to be issued to: _____

(Please Print First & Last Name Clearly)

The following fees are for 2011 - 2012.

No. of Children	Category 1 Parishioners	Category 2 Non-Parishioners
1 child	\$210.00/mo.	\$260.00/mo.
2 children	\$320.00/mo.	\$370.00/mo.
3 children or more	\$355.00/mo.	\$405.00/mo.

Registration Fee: A non refundable application/registration fee of \$50.00 for one child or \$75.00 for two or more children.

Activity Fee: \$75.00 per child.

Parent Participation: two \$400.00 cheques one dated February 1, 2012 and the other June 1, 2012,.
If not participating include one cheque of \$600.00 dated September 1, 2011 or \$60 monthly on PAD form.

Payment Terms: We are set up for Pre-Authorized Debit (PAD) for tuition, we need a completed PAD Form and a "VOID" cheque .

****If you choose to pay the tuition in full, one advanced payment dated September 1, 2011 (a 3% reduction in tuition will apply).**

AN NSF FEE OF \$15.00 WILL BE CHARGED FOR DISHONOURED CHEQUES

For Office Use Only:	
Registration Fee \$ _____	Activity Fee \$ _____ PAD (with void cheque) _____
Full Payment by postdated (Sept. 1) cheque: _____	
Parent Participation Cheques 1 x \$600.00 _____ or monthly payments added to tuition \$ _____	
Other: (eg. Monthly orchestra payment) _____	
Category # _____	Tuition Rate _____
Comments: _____	

Received by: _____	Date: _____
PEC member's name	



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AUTHORIZATION FOR PRE-AUTHORIZED DEBITS (PAD)

Note: Payer – Customer account to be debited
Payee – St. Jude School

Instructions:

1. Please complete all sections in order to instruct your financial institutional to make payments directly from your account
2. Please sign the Terms and Conditions on the reverse of this document.
3. Return the completed form with a blank cheque marked "VOID" to St. Jude School.
Two copies of this "Payer's PAD Agreement" have been included in this package. Please keep one copy for your records.

PAYOR INFORMATION (Please print clearly)

Name:	
Address:	
Telephone:	
Signature:	Date:

PAYOR FINANCIAL INSTITUTION/BANKING INFORMATION

- Attach a VOID cheque, ensuring it includes the following
- Branch Number, Institution Number, your Account Number
- Name of Financial Institution, Branch and Branch Address

PAYEE INFORMATION

- St. Jude School
2953 East 15th Ave
Vancouver, B.C. V5M 2K7

PAYMENT INFORMATION (Please print clearly)

The Payee may issue Pre-Authorized Debits (PAD) monthly on the 1st of the month for August, 2011 to May, 2012 inclusive (10months) for up to:

Tuition (monthly): _____

Orchestra Fees (monthly): _____

Participation Fees (monthly): _____

Total (monthly): _____

- Currently using PAD for fees – no change in banking information
- Currently using PAD – VOID cheque included for banking information
- New to PAD



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PAYOR'S PAD AGREEMENT Personal Pre-Authorized Debit Plan Terms & Conditions

1. In this Agreement, "I", "me" and "my" refers to each Account Holder who signs below.
2. I agree to participate in this Pre-Authorized Debit Plan for payment purposes and I authorize the Payee indicated on the reverse hereof and any successor or assign of the Payee to draw a debit in paper, electronic or other form for the purpose of making payment for services on my account indicated on the attached VOID cheque (the "Account") at the financial institution indicated on the attached VOID cheque (the "Financial Institution") and I authorize the Financial Institution to honour and pay such debits. This Agreement and my authorization are provided for the benefit of the Payee and my Financial Institution and are provided in consideration of my Financial Institution agreeing to process debits against my Account in accordance with the Rules of the Canadian Payments Association. I agree that any direction I may provide to draw a Personal PAD, and any Personal PAD drawn in accordance with this Agreement, shall be binding on me as if signed by me, and, in the case of paper debits, as if they were cheques signed by me.
3. I may revoke or cancel this Agreement at any time upon notice being provided by me either in writing or orally, providing notice is given at least ten (10) business days prior to the next due date of a Personal PAD. I acknowledge that in order to revoke or cancel the authorization provided in this Agreement I must provide notice of revocation or cancellation to the Payee. This Agreement applies only to the method of payment and I agree that revocation or cancellation of this Agreement does not terminate or otherwise have any bearing on any contract that exists between me and the Payee.
4. I agree that my Financial Institution is not required to verify that any Personal PAD has been drawn in accordance with this Agreement, including the amount, frequency and fulfillment of any purpose of any Personal PAD.
5. I agree that delivery of this Agreement to the Payee constitutes delivery by me to my Financial Institution. I agree that the Payee may deliver this Agreement to the Payee's financial institution and agree to the disclosure of any personal information which may be contained in this Agreement to such financial institution.
6. I understand that with respect to fixed amount Personal PADs occurring at set intervals, I shall receive written notice from the Payee of the amount to be debited and the due date(s) of debiting, at least ten (10) calendar days before the due date of the first Personal PAD, and such notice shall be received every time there is a change in the amount or payment date(s).
7. I may dispute a Personal PAD by providing a signed declaration to my Financial Institution under the following conditions:
 - (a) the Personal PAD was not drawn in accordance with this Agreement;
 - (b) this Agreement was revoked or cancelled.

I acknowledge that in order to obtain reimbursement from my Financial Institution for the amount of a disputed Personal PAD, I must sign a declaration to the effect that either (a) or (b) above took place and present it to my Financial Institution up to and including but not later than ninety (90) calendar days after the date on which the disputed Personal PAD was posted to my Account. I acknowledge that, after this ninety (90)-day period, I shall resolve any dispute regarding a Personal PAD solely with the Payee, and that my Financial Institution shall have no liability to me respecting any such disputed Personal PAD.

8. I certify that all information provided with respect to the Account is accurate and I agree to inform the Payee, in writing, of any change in the Account information provided in this Agreement at least ten (10) business days prior to the next due date of a Personal PAD. In the event of any such change, this Agreement shall continue in respect of any new account to be used for Personal PADS.
 9. I warrant and guarantee that all persons whose signatures are required to sign on the Account have signed this Agreement below.
 10. I understand and agree to the foregoing terms and conditions.

I agree to comply with the Rules of the Canadian Payments Association (as defined in Rule HI) or any other rules or regulations which may affect the services described herein, as may be introduced in the future or are currently in effect and I agree to execute any further documentation which may be prescribed from time to time by the Canadian Payments Association in respect of the services described herein.

Name of Account Holder

Signature

Date

Name of Account Holder

Signature

Date