DATE OF APPLICATION:

AGENCY:

NAME OF REPRESENTATIVE

CANADIAN EXPLORER / PUBLIC	SCHOOLS						
GRADE LEVEL APPLYING FOR:		10	11				
DURATION OF STUDY:		5 MONTHS	10 MONTHS				
Reminder that CISS will select your study destination and school							
ESL PROFICIENCY LEVEL OF STUDENT:	Beginner	Low-Intermediat	e High-Intermediate	Advanced			
PET ALLERGY NO	YES:						
DIETARY RESTRICTIONS: NO	YES:						
STUDENT DETAILS (AS SHOWN ON PASSPORT) Information will be used to create legal custodial documents required for study permit. These details must match passport.							
Last Name:			e of Birth: / / day / month / year				
Given Name(s): Citizenship:		y of Birth:	Male	Female			

ADDITIONAL STUDENT INFORMATION

Current age:		Gender Identity:	Male	Female	Non-Binary
Preferred English Name:		My preferred pron	iouns:		
Home Address:					
House or Apartment # Street					
City	Province/State				
Postal code:	Country				
First Language:					
Home Telephone: () (city code)					
Student Mobile Tel: () () ()					
Student E-mail:					
(please ensure this is the student's email as it will be us				Insert stude	nt photo (head shot)
Please indicate which messenger app you prefe	er for communicat	ion. If the app uses a m	obile num	ber other than	the one
provided above, please note it beside: WhatsApp)	🔊 w	eChat		
Line					

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PARENT/GUARDIAN DETAILS (AS SHOWN ON PASSPORT) Information will be used to create legal custodial documents required for study permit.

PARENT #1: FAMILY Na	ame:			Given Nam	ne(s)		
Relationship to studen				Date of Bir	th: (day/month/year)	/	/
Occupation:							
Address:	same as student	or					
Home Phone:	same as student	or () ()			
Mobile: () ())			E-mail:			
PARENT #2: FAMILY Na	ame:			Given Nam	ne(s)		
Relationship to studen					th: (day/month/year)		
Occupation:			_				
Address:	same as student	or					
Home Phone:	same as student	or ()()			
Mobile: () ()		y code city co	E-mail:			
Parents are:	Married Co	mmon-Law		Divorced	Widowed		
Student lives with:			PARENT	⁻ #1	PARENT #2	OTHER	
If divorced, legal custody	of the student resides	s with:	PARENT	⁻ #1	PARENT #2	OTHER	
Parent who should rec	eive communicatio	ns:	PARENT	⁻ #1	PARENT #2	OTHER	

SIBLINGS / OTHER FAMILY

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Please list all other immediate family members living full time in the home, their ages, relationships and occupations.

NAME	DATE OF BIRTH (day/month/year)	RELATIONSHIP TO STUDENT APPLICANT	OCCUPATION / STUDY LEVEL

EMERGENCY CONTACT: should parents, agent, teacher (Japan) be unavailable for consultation, who should we contact?					
Contact name:					
Telephone number: ()())	Email:				
Relationship:					
Main language(s) spoken:	Speaks English?	Yes	No		

CISS MLI CANADIAN EXPLORER STUDENT APPLICATION FOR	М	SCHOOI PLACEMEN
Current school/grade level (home school):	Canadia	an age to grade
I am applying for Canadian grade level: 10 11	Age*	Grade level
CURRENT SCHOOL INFORMATION:	15	10 <i>(HS)</i>
Name of school currently attending:	16	11 <i>(HS)</i>
Number of years at this school: Expected year of graduation:	attending	mber of the school year 2024-25 = as of
Have you ever failed a grade? NO YES If yes, which grade and any specific reasons for the difficulty in that year?		

Do you currently receive any special academic accommodations to support learning challenges or needs? NO YES:

Note: schools in this programme are not able to provide many special accommodations. Students are expected to successfully rise to the challenges of this Canadian education programme with little/no extra support.

CISS will review eligibility for this programme based on any needs listed. Excessive requirements may be outside the scope of this programme.

I need to COVALIDATE my studies in Canada: YES NO

NOTE: English proficiency must meet minimum standards for intended
grade level to be eligible for specified courses.

ESL support is not provided in the schools offered in this programme.

COURSE REQUESTS

IMPORTANT: CISS MLI will work with the school to match selections, but cannot guarantee all courses requested. Priority will be given to obtaining courses required for covalidation.

• Most schools offered in this programme operate on a SEMESTER basis. Students take 4 courses per semester

Courses required for Covalidation (credit required):	Other courses of interest:

ly favourite subjects are:
ly least favourite subjects are:
struggle the most in:
ly future career plans are:

Recommended English proficiency for covalidation placements:

	IELTS	ELTIS	CEFR
Gr 9	4.5-5	223-231	
Gr 10	5.5-6	232-237	B1
Gr 11	6.0	238-241	B1/B2
Gr 12	6.5	250+	B2/C1+



ENGLISH PROFICIENCY

ALL APPLICANTS:

Nun	nber of years studying English:						acher Refer see separat	
Hov	v many hours per week of English s	tudy:				requireu -	see separa	e page
Leve	el of English Proficiency:	Beginner	Low-in	termedia	te	High inter	rmediate	Advanced
or:	CEFR (Common European Framework)	A1	A2	B1	B2	C1	C2	

Please list any English Proficiency tests taken (a copy of results may be requested)

Name of Test:	Date Taken:	Score:

ESL support is not provided in the schools offered in this programme. Students must meet English proficiency standards to success in the academic courses based on the intended grade level, and covalidation requirements.

ACTIVITIES & INTERESTS

Students are strongly encouraged to become involved in their school by joining social clubs or athletic sports.

My favourite sports are:

•				
Badminton	Baseball/Softball	Basketball	Canoe/kayak	Curling
Cycling	Field Hockey	Football (American)	Golf	Horse Riding
Ice hockey	Martial Arts	Rugby	Running	Sailing
Skateboarding	Ski-Downhill	Ski-Xcountry	Snowboarding	Soccer
Swimming	Table Tennis	Tennis	Weightlifting	Wrestling

Other interests include:

Boating	Board Games	Camping	Cooking/Baking	Chess
Crafts	Computers	Dance	Debating	Drawing
Hiking	Knitting/Crochet	Movies	Music (Classical)	Music (Jazz)
Music (Pop)	Painting	Photography	Reading	Shopping
Sewing	Sightseeing	Singing	Theatre	Walking
Watching sports		Other:		

I play the following musical instruments: _____

I speak the following languages other than English and my first language (per page 1):



FAMILY & LIFESTYLE: Home away from home

NOTICE for students who will reside with a host family

Canada is a multicultural society, where - in accordance with the Canadian Charter of Rights and Freedoms - people of all cultures and ethnicity are welcomed and form an integral part of the culture of each community. Homestay families represent working and middle classes of their community. Families are selected based on their willingness to welcome a student into their home as a member of their family, offering shelter, meals, security, comfort...essentially everything equal to a "home away from home". Our families come from a variety of ethnic backgrounds and domestic configurations - from couples with children, to single parents or even childless couples or single adults Regardless of how a family appears on paper or the size of home, you can be assured that your child will be well cared for in a comfortable and safe home, where English is a language spoken among the family members.

It is CISS MLI policy to place up to two (2) students per family (3 students in select large urban areas) provided the students are of a different nationality/language group. Each student receives their own private bedroom and may or may not attend the same school. CISS MLI will advise at time of placement if another student will be in the home, or will advise should a single placement change prior to arrival.

I/we understand this is the outline of the homestay programme, and that we cannot request a host family, or a change of host family, based on racial or cultural background.

Please sign below. Signatures represent understanding and acceptance of this policy.

Student:	Parent #1:	Parent #2:	
[

FAMILY STYLE

Please rank in order of importance the following from 1 to 6 (1= most important / 6 = least important). NOTE: each rank number can only be used once

Dual parents		Proximity to so	hool	to match a host family to what is most important to you.
Host siblings (any age)		Quiet family Active or Spor	ty family	However, CISS MLI cannot guarantee a match to all preferences.
Do you smoke/vape? Do you understand you must be willing to quit Are you able live with a family that smokes <u>outside</u>		YES YES YES	NO NO (see side note) NO	BE TRUTHFUL. Misrepresentation may result in a required change of host family at a supplementary cost.
Have you ever lived away from home? If yes, where	for hov	YES v long?	NO	Note: In Canada, the legal age to purchase cigarettes / e-liquid is 18 or 19 years. Host families and other adults are legally forbidden to purchase cigarettes or e-liquid for under-age persons.

For simple headaches, fever or other minor pain, the host family to administer the prescribed dose of:

Aspirin	Aceta	minophen (Tylenol)	Ibupro	ofen (Advil, Motrin)	
Polysporin	Antac	id (Tums, Maalox, etc)	Cough	Medicine	
Throat Lozenges	Antih	istamine (Sudafed, Benedryl)		
This is authorized by	Parent #1:		Parent #2:		

FOOD PREFERENCES / ALLERGIES

Which of the following statements apply to you:

I eat almost everything I am open to trying new foods I am not very adventurous with new food I eat vegetables I enjoy cooking I have never cooked a meal for myself

I enjoy eating dinner as a family I prefer a light breakfast I don't eat breakfast at all I love desserts I am concerned about gaining weight I do not eat red meat (Beef, Veal, Lamb)

What are your favourite foods:						
Which foods will you absolutely NOT e	eat:					
, , ,						
Do you have a PEANUT allergy:	NO	YES				
Do you have other FOOD allergies:	NO	YES: _				
Do you have allergies to ANIMALS?	NO	YES:	Dog	Cat	Other:	
Explain if/why you have a MAJOR fear	of any anim	al(s):				

NOTE: Many host families in the locations for this programme are pet owners. Major allergies or fears to household pets or major
 food allergies may be outside of the placement scope of this programme. If you suffer from any of these, please consider our standard High School programme.

** SPECIALIZED DIETS CANNOT BE ACCOMMODATED IN THIS PROGRAMME

- This includes: Vegetarian, Pescatarian, Vegan, Gluten-Free, Lactos-Free, Halal or Kosher
- If you have a specialized diet, please consider our standard High School programme



Personality Traits: Please check those that apply to you

reisonancy marcs.		se that app	iy to you				
Active	Adaptable	Affect	ionate	Cheerful	Cur	rious	Disorganize
Energetic	Humorous	Indep	endent	Optimistic	Pat	ient	Quiet
Relaxed	Serious	Shy		Sociable	Tall	kative	Tidy
l make new friends easil	у	YES	NO				
In new situations, I tend	to:	Worry or s	tress		Embrac	e the chal	lenge
When speaking English I: Worry about mist			ut mistakes		Welcom	ne correcti	ion
		Focus on g	grammar		Just tall	k, howeve	r it comes out
My attitude about school is: I like it a lot				lt's OK		't really lil	
What aspects of school of	do you most er	njoy?					
Which aspects of this pr	ogramme are y	vou most ex	cited abour	t?			
Which aspects of this pr	ogramme mos	t concern y	ou?				
Personal Habits at He	ome:						
l like to wake up:		Very early		When I have to			
When I wake up I like:		Silence		To talk	To listen to music		
As a family, we eat toget	ther at:	Breakfast		Lunch	Dinner/supper		
On school nights I usual	ly go to bed at	•		pm	am		
My curfew on school nig	ghts is:			pm	am		don't have one
My curfew on weekends				pm	am		don't have one
Do you have your own b	pedroom:	Y	ΈS	NO, I share with	۱		
Do you tidy up and mak	e your own be	d? Y	ΈS	NO, my			
Do you have a pet at ho	me?	Y	′ES, I have _				NO
Please describe:							
- Household chores that	nt you do:						
- Rules in your family:							
What activities do you ty	pically do with	ı					
- your parents:							
- your siblings:							
- your friends:							
* Optional:							
belong to the following						Active	Non-Active
attend church/religious				Regularly		ial holida	ys/events only
would like to attend rel	•		inada:	YES	NO		
l am willing to attend th	ese on my own	:		YES	NO		



MOTIVATIONAL LETTER OF INTENT

Please write - in full and complete sentences - a letter to the school outlining your motivation for coming on a high school programme in Canada. Please include the following ideas:

- 1. Why have you chosen to participate in this high school programme in Canada?
- 2. Describe both the academic and personal results you expect to attain by the end of your stay.
- 3. What expectations do you have from your school, community and homestay experience?



SHOW US ABOUT YOURSELF

Photo Collage

- **Be CREATIVE!!** (MAX 5MB) using 3-5 photos, show us and include a caption
- 1. About you and your family
 - 2. Which sports, hobbies or other activities best illustrate your interests
 - 3. What you and your friends like to do together



CISS MLI CANADIAN EXPLORER PARENT STUDENT APPLICATION FORMSTATEMENTS/LETTER

DEAR PARENT(S) - We are interested in your perspective about your child.

What are the 3 best qualities about your child: _____ Is there any aspect of your child you would like to see improved by this experience? Generally speaking, do you permit your child to go out with friends - on a school night NO YES: Curfew to be home: - on a weekend: NO YES: Curfew to be home: Does your child drink alcoholic beverages with your family: NO YES: _____ Does your child drink alcoholic beverages with friends: NO YES: Does your child date regularly: NO YES Does your child have a steady boyfriend/girlfriend? YES NO If YES: how do you think your child will feel about being separated from their boyfriend/girl for the duration of their programme? _____ Does your child smoke cigarettes/vape e-liquid? NO YES If YES: have you already spoken to him/her about the non-smoking aspect of this programme, and our expectation that he/she will guit? NO YES Please write a short letter describing your child's personality, interests, relationships, future aspirations and home life. Feel free to add any other relevant information which may be helpful to a teacher or host family.

Parent name / e-signature

Date

CISS MLI CANADIAN EXPLORER SCHOOL ACTIVITIES & STUDENT APPLICATION FORM HIGH RISK SPORTS

PARTICIPATION IN SCHOOL SPORTS, SCHOOL-ORGANIZED TRIPS AND OTHER ACTIVITIES

1. I/we grant permission for my/our child to participate in school organized and supervised field trips.

2. I/we grant permission for my/our child to participate in regular school sports

(with the exception of: ______)

3. I/we authorize CISS MLI and my/our child's homestay parents to approve and sign permission slips for any school sponsored field trips, sports teams and club activities.

4. Trips or activities that are organized outside of the school environment or which include extensive travel will require additional parental consent specific to that activity/trip.

HIGH RISK SPORTS/ACTIVITIES

CISS MLI defines a high risk sport/activity as: an activity or sport that carries a risk to personal safety and requires the training or development of skills to attain proficiency/safe participation. These sports or activities also involve external risk factors that may affect and/or harm the participant, regardless of their skill level.

5. I/we understand that if my/our child is considering participating in a school-sponsored or otherwise arranged high-risk activity, CISS MLI will do the first round of risk assessment and advise their decision for my/our child. Should the activity be deemed suitable, I/we will be notified (regardless of my/our approval below), and acknowledge that I/ we may be asked to sign an additional waiver form specific to that the event or activity. I/we may choose at that time to decline or approve my/our permission.

Activity	Permission	1	Activity	Permission	
American Football	YES	NO	Rock Climbing - indoor	YES	NO
Canoe/Kayaking	YES	NO	Rock Climbing - outdoor	YES	NO
Downhill skiing	YES	NO	Snowmobiling	YES	NO
Snowboarding	YES	NO	Swimming - pool	YES	NO
Horseback riding	YES	NO	Swimming - natural water	YES	NO
Ice hockey	YES	NO	Waterskiing/Waterboarding	YES	NO
Mountain Biking	YES	NO	White Water Rafting	YES	NO
Rugby	YES	NO	Zip lining	YES	NO

NOTE 1: Any other high risk activities outside of this list will be advised in the event of a specific request.

NOTE 2: To participate in any activities, students must wear the appropriate safety clothing and equipment, including but not limited to, a CSA (Canadian Standards Association) Approved Helmet and/or Life Jacket.

Please indicate the proficiency level of your child in the following sports/activities:

Swimming:	non-swimmer	beginner	deep-end approved	
Downhill skiing:	non-skier	beginner	intermediate	expert
Snowboarding:	non-boarder	beginner	intermediate	expert

Comments:

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6. If my/our child carries emergency medical insurance arranged independently of CISS MLI or the school, I/we will ensure <u>prior to granting any consent</u>, that the sport or activity in which my/our child wishes to participate is fully covered by our insurance plan. A copy of this policy must be sent to CISS MLI.

Please initial in box. Initial	s represent understanding of point <u>#6</u>	
Student:	Parent #1:	Parent #2: