

BRITISH COLUMBIA AMERICAN UNIVERSITY

1201 Orange Street, Wilmington, USA

STUDENT PRE-APPLICATION FORM 2025-26

STUDENT INFORMATION Name: _____Date of Birth: ____ Country of Birth: BRITISH COLUMBIA AMERICAN Hebrew Name: _____ Male: ____ Female: ____ Applying for Grade: _____ for August 2024. Has student previously applied to Lubavitch Educational Center? Y N If so, for what year? _____ SCHOOL INFORMATION Current Grade: Current School/Program: Street Address: LEARN GROW SUCCEECCity: Telephone: / State: Zip: Name of Principal: Schools/Programs Previously Attended: Dates Attended: Camps/Summer Programs Attended: Reason for Requesting School Transfer:

FAMILY INFORMATION

Occupation:	Employer	
Employer Address:		
Jewish from birth? Y N	Are you remarried? Y N	Name of Spouse: :
Parent/Guardian B: Name: Relationship to Student		
Address:	Apt. #: City:	·
State: Zip: Zip:	Home Telephone: A A VIEL	RICAcellular:
Work Phone:	Email	
	Employer:	
Employer Address:		
Jewish from birth? Y N	Are you remar <mark>ried? Y N</mark>	Name of Spouse: :
To whom should admissions co	rrespondence be sent? Parent A:	Parent B: Both:
Mother's maiden name:	EARN • GROW • SUCCEED	
Other Children		
Name	Age W	Current School/Program
Name(s) of Rabbi(s):		
Parent's/Guardian's Signature:	Da	te:
Parent's/Guardian's Signature:	Da	te:

Completed Pre - Applications are to be faxed to the attention of:

BRITISH COLUMBIA AMERICAN UNIVERSITY 1201 Orange Street, Wilmington, USA or emailed to: info@bcamericanuniversity.com