



# NIGHT SCHOOL 2016

## REGISTRATION FORM

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STUDENT NUMBER

AND

OEN NUMBER

Name of Course requested and code: \_\_\_\_\_

(Grade nines may select 2 repeat credits to recover)

Name of High School presently attending: \_\_\_\_\_

What year did you begin Grade Nine: \_\_\_\_\_

\*\*\* OR \*\*\*

Name of last High School attended full time: \_\_\_\_\_ Year: \_\_\_\_\_

Name while attendance at the school: (Maiden Name) \_\_\_\_\_

**\*\*NOTE: All courses are established subject to the maintenance of satisfactory enrolment.**

_____ LAST NAME	_____ GIVEN NAME
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\_\_\_\_\_  
Apartment Number/Street Address/Rural Route Number

\_\_\_\_\_  
City/Town/or Post Office

\_\_\_\_\_  
Postal Code

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Year    Month    Day

Date of Birth

\_\_\_\_\_  
Male

\_\_\_\_\_  
Female

### STUDENT'S ACKNOWLEDGMENT OF RESPONSIBILITY:

I agree to attend regularly the classes provided for this course, to return in good condition materials loaned including text books and follow the ADSB protocol for use of computers. **I understand that attendance is a requirement of Night School and will not be absent Tuesday / Thursday classes 6:00p.m. until 9:00p.m. for the duration of Night School from February 4<sup>th</sup> until June 2<sup>nd</sup>, 2016**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**To be completed for all students who are presently enrolled in a Secondary School.**

**PRINCIPAL'S DECLARATION**

	This student has been recommended for credit recovery. A copy of the report will be sent with the student.
	This student has the prerequisites necessary for enrolment in this course.
	I concur with this enrolment.

COMMENTS:

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\_\_\_\_\_  
Principal's Signature (or agent)  
Vice Principal (or designate)

\_\_\_\_\_  
Date

\_\_\_\_\_  
School

**PARENTAL APPROVAL** (required for students under 18 years of age):

**I approve this request.**

I agree that my child will attend regularly the classes provided for this course, to return in good condition materials loaned including text books and follow the ADSB protocol for use of computers. **I understand that attendance is a requirement of Night School and will not be absent Tuesday / Thursday classes 6:00 p.m. until 9:00 p.m. for the duration of Night School from February 4<sup>th</sup> until June 2<sup>nd</sup> 2016**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent or Guardian