

Feb 27, Mar 1, 6, 8, 20, 22, 27, 29, Apr 4, 5



**AFTER SCHOOL CREDIT RECOVERY PROGRAM  
LITERACY/NUMERACY  
STUDENT REGISTRATION FORM**

**PLEASE PRINT ALL INFORMATION**

STUDENT ID NUMBER: \_\_\_\_\_

STUDENT NAME: \_\_\_\_\_  
Surname First Name

GENDER: M  F  DATE OF BIRTH: \_\_\_\_\_  
YEAR MONTH DAY

ADDRESS: \_\_\_\_\_  
Number Street Name Town/City POSTAL CODE

HOME TELEPHONE: \_\_\_\_\_ PARENT CELL: \_\_\_\_\_

PRESENT GRADE: \_\_\_\_\_ SCHOOL: \_\_\_\_\_

RESIDENCY STATUS: CANADIAN CITIZEN  PERMANENT RESIDENT   
VISA STUDENT  - Elementary Visa Students pay \$68.55 - cheque attached   
- Secondary Visa Students pay \$102.80 - cheque attached

ABORIGINAL HERITAGE: FIRST NATION  INUIT  METIS

Please use one set of Registration forms per Class. Please enter the dates "To" and "From" (between October 1 and May 31 in the current school year), during which the course will be held. Please check off the days on which the course will be held.

FROM: Tues, Feb 27, 2018 TO: Thurs, Apr 15, 2018 M  T  W  Th  F

NOTE TO STUDENT AND PARENT/GUARDIAN: Punctuality and regular attendance are vital to the process of learning and the completion of this Program.

\* **STUDENT AGREEMENT**—My signature indicates my commitment to the Program.

\_\_\_\_\_  
STUDENT SIGNATURE TEACHER'S SIGNATURE DATE

\* **PARENT/GUARDIAN APPROVAL**

This student has my approval to enrol in the course listed:

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE PRINT NAME DATE

**PRINCIPAL'S APPROVAL** (original signature required please).

\_\_\_\_\_  
PRINCIPAL SIGNATURE DATE