



MARKVILLE SECONDARY SCHOOL

1000 Carlton Road
Markham, Ontario
L3P 7P5

Tel: 905.940.8840
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October 16, 2019

Dear Parent/Guardian,

The **Ontario Secondary School Literacy Test (OSSLT)** is a requirement for students who wish to graduate with an Ontario Secondary School Diploma. At Markville Secondary School, we are taking many steps to assist our students in completing the OSSLT successfully. One way that the Student Success Team at the school has chosen to assist our students is by offering an **After School Literacy Program** to reinforce reading and writing skills. Your son/daughter has expressed interest in the program.

Here are some common questions and answers in regards to the program:

When is the date of the OSSLT?

Tuesday, March 31st, 2020

When is the After School Literacy Program going to be offered?

The program will start on Wednesday, November 13th and will end on Thursday, December 12th, 2019.

At what time and where will the After School Literacy Program run?

The program is from **3:00 pm - 4:30 pm, Wednesdays and Thursdays in room 224** at Markville S.S.

What is the cost of the program?

The program is offered **free of charge** to most students. (There is a fee for international students.) Refreshments and motivational items will be provided at each session.

Is attendance mandatory?

Once enrolled in the program, students should attend all classes to receive intensive practice with reading and writing skills and strategies in order to get maximum benefit of the program.

Is transportation provided?

The school is not able to provide transportation for students. There may be a need for you to arrange transportation for your son/daughter following each session.

Will a report card be issued at the end of the program?

At the end of the program students will receive a checklist of strengths and needs, as well as a certificate recognizing their accomplishments.

While receiving additional assistance through the After School Literacy Program, your son/daughter will continue to receive regular instruction from his/her classroom teachers related to the reading and writing skills required for each subject. The Student Success Team believes that this special program will make a difference in your son's/daughter's knowledge and confidence related to reading and writing and the successful completion of the OSSLT.

Please read and complete the attached Student Registration Form. **Students are asked to bring the completed form with them to the first class in room 224 on Wednesday, November 13th.** *NOTE: The principal's signature will be obtained by the teacher.* The parent signature on the form is the permission your son/daughter requires to participate in the **After School Literacy Program**.

If you have any questions, please feel free to contact M. Wilson via email at: michelle.e.wilson@yrdsb.ca

Sincerely,

Ms. Kathy McAlpine
Vice-Principal

Ms. Michelle Wilson
Literacy Teacher





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
INTERNATIONAL STUDENT - Elementary Students pay \$72.00 - cheque attached
- Secondary Students pay \$108.00 - 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: Wed. Nov. 13th 2019 TO: Thurs. Nov. 12th 2019 M T W Th F

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