



Summer School 2019

High School MATH Here I Come!

Registration and Permission Form

For Non-TVDSB Grade 8 Students

G.A. Wheable Centre
 Summer School Office
 519-452-2000
 Ext. 69701

General Information and Expectations:

1. Registration opens April 8, 2019 and closes July 4, 2019 at 4 p.m. ****Late registrations will not be accepted.**
2. **International Students** must pay Summer School Fees before registering. (Details under Registration Information on High School MATH Here I Come! webpage).
3. Students are expected to be punctual and attend all 10 days of the program from 9:00 to 11:30 a.m. daily.
4. Students are responsible for their own transportation.
5. TVDSB reserves the right to cancel this program if there is insufficient enrolment. The parent/legal guardian will be contacted if there is a cancellation.
6. Students are expected to adhere to the standard rules of academic integrity and follow the Summer School Code of Conduct (located on High School MATH Here I Come! webpage). Behaviour that is contrary to a positive learning environment could result in a student's removal from the program.

Instructions for completing and submitting this registration form:

1. This form must be completed and signed by the Parent/Legal Guardian.
2. Print form, complete ALL sections and sign the form.
3. **To complete the registration process**, you must bring your completed and signed registration form with all of the following documents to one of our registration days listed below. You will need to bring **ALL** of the following documents with you in order to register:
 - Completed and signed **Registration / Permission Form**
 - **Proof of Canadian Citizenship** (e.g. Birth Certificate, Passport, Citizenship Certificate/Card, Permanent Resident card)
 - **Proof of Address** (e.g. current lease agreement, current bill-utility/property tax/internet/phone/cable) *Driver's licence is not acceptable*
 - **Receipt showing Summer School Fee has been paid (International students only)**. If fee has not yet been paid and you wish to pay it when you come to register you must arrive at the on-site registration prior to 3 p.m. in order for us to process the payment.

ON-SITE REGISTRATION
 G.A. Wheable Centre, 70 Jacqueline St, London, ON
 Wednesday June 5, 2019 from 2:00 p.m. to 5:00 p.m.
 Tuesday June 25, 2019 from 1:00 p.m. to 4:00 p.m.

STUDENT INFORMATION:			
Name of Elementary School student is currently attending (please include name of school board)			OEN
LEGAL NAME	Last Name	First Name	Middle Name
Preferred Name: (enter ONLY if different from legal name)			Date Of Birth (YYYY/MM/DD)
Home Address (include apt/unit number)		City	Postal Code
Parent Cell Number/Daytime Phone Number	Parent Email Address		Home Phone Number
EMERGENCY CONTACT (Please enter FULL NAME)		Relationship to Student	Phone Number
Student Allergies / Medical Concerns: List any allergies or medical concerns that we should be aware of (if applicable):			
CITIZENSHIP STATUS:			
<input type="checkbox"/> Canadian Citizen <input type="checkbox"/> Permanent Resident / Landed Immigrant <input type="checkbox"/> Student Visa <input type="checkbox"/> Study Permit-Parent <input type="checkbox"/> Work Permit-Parent <input type="checkbox"/> Refugee Claimant <input type="checkbox"/> Permanent Resident Applicant <input type="checkbox"/> Other: _____			
Arrival Date (if applicable): _____ Expiry Date (if applicable): _____			
Birth Country/Province: _____ Country of last residence: _____			
Aboriginal Self-Identification (answering is voluntary)			
<input type="checkbox"/> First Nation (living within or outside First Nation Communities) <input type="checkbox"/> Metis <input type="checkbox"/> Inuit			

Notice of Collection: The personal information provided on this form and any other correspondence relating to involvement in Board programs is collected by the Thames Valley District School Board under the authority of the Education Act and Regulations (R.S.O. 1990 c.E.2) as amended. The information will be used to register the student in a school, for the collection of applicable student/activity fees, as well as for any consistent purpose. Information is shared with employees such that they may carry out their job duties. In addition the information may be used or disclosed to comply with legislation, for compelling circumstances affecting health and safety or discipline, as required in circumstances related to law enforcement matters, or in accordance with any other Act. For questions about this collection, contact the Board's Freedom of Information Co-ordinator, Thames Valley District School Board, 1250 Dundas Street, London, Ontario, N6A 5L1, Telephone 519-452-2000 ext. 20218.

PROGRAM DATES

Monday July 8, 2019 to Friday July 19, 2019

9:00 a.m. to 11:30 a.m. daily

LOCATION SELECTION *(Please select the location where your child will be attending the program)*

- A.B. Lucas Secondary School - London
- Arthur Voaden Secondary School - St. Thomas
- College Avenue Secondary School – Woodstock
- Strathroy District Collegiate Institute – Strathroy

Level of Math student is enrolled in for Grade 9

- Academic Applied Locally Developed

Please select Yes or No

Consent for the Use of Personal Information:

Occasionally school events are photographed or recorded by School/Board staff or media as a way of promoting school programs and activities. Your permission to post identifiable photographs/recordings of the above named student and/or their full name on School/Board websites, newsletters and/or social media sites (i.e. Twitter, Facebook, YouTube, and Flickr) is requested.

I give permission for the Use of Personal Information for the above named student: YES NO

By signing below, I confirm that I am the parent/legal guardian of the student named below and I support my child's registration in the Summer High School MATH Here I Come! program. I acknowledge that I have read the *General Information and Expectations* detailed on this form, and I am aware that students are expected to abide by the standards of behaviour set out in the Summer School Code of Conduct.

STUDENT NAME (please print)

PRINT NAME: Parent/Legal Guardian

SIGNATURE: Parent/Legal Guardian

FOR OFFICE USE ONLY:

Proof of Citizenship:

- Birth Certificate Passport Baptismal Certificate Registration of Birth Permanent Resident card

Other: _____

Proof of Address: Current Utility Bill Current Property Tax bill Current Home Phone/Cable/Internet bill

Current Lease or Agreement of Purchase and Sale Other: _____

Note: Driver's Licence is not acceptable

Staff Signature: _____