



2019 SUMMER SCHOOL ISSP - REGISTRATION FORM



STUDENT INFORMATION

GIVEN NAME		LAST NAME:		DOB (YY/MM/DD)	
MALE		FEMALE		OTHER:	
OEN NUMBER (MANDATORY)		ISP NUMBER (MANDATORY)		CITIZENSHIP	
ADDRESS		CITY		POSTAL CODE	
CELL NUMBER		EMAIL			
CURRENT/LAST SCHOOL ATTENDED		CURRENT GRADE			

GUARDIAN/EMERGENCY CONTACT INFORMATION

GIVEN NAME		LAST NAME	
CELL NUMBER		PHONE NUMBER	
EMAIL		MEDICAL CONDITIONS	

HOMESTAY CONTACT INFORMATION

GIVEN NAME		LAST NAME	
CELL NUMBER		EMAIL	

COURSE SELECTION – Please number your selection by preference (i.e. 1,2 or 3)

Literacy Skills - Read/Write	ELS 20	Learning Strategies	GLS10/GLS20
LOCATION:	Loyola CSS	LOCATION:	Corpus Christi CSS

LOCATIONS AND CLASSES ARE SUBJECT TO MINIMUM ENROLLMENT AND TEACHER AVAILABILITY

AUTHORIZATION

Parent/Guardian Signature:	
(If Student is under 18 years of age)	We have read the policies and understand what is involved in being a Summer School student.
Student Signature:	
	I have read the policies and understand what is involved in being a Summer School student.
Principal (or designate) Signature:	DATE:

STUDENT RESPONSIBILITIES:

- I understand that after three (3) absences I may be asked to withdraw from the course. Significant lates will be recorded as half an absence.
- I will be responsible for books, materials or other equipment loaned to me and I will pay for loss or any damage.
- Anyone responsible for vandalism will be required to make reparation and will be withdrawn from the course.
- A fully refundable textbook deposit may be required.

BOARD USE ONLY

Guidance Initials:		Scheduled Course Code:		Section:	
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