

HWDSB-CE REGISTRATION FORM

SEMESTER 2 CREDIT NIGHT SCHOOL 2018-2019

Notice of Collection and Use of Personal Information

Personal information on this form is collected under the legal authority of the Education Act and in compliance with the Municipal Freedom of Information and Protection of Privacy Act [MFIPPA]. It will be used for planning and delivering educational programs and services which best meet students' needs and for reporting to the Ministry of Education as required. If you have any questions or concerns, direct them to your school principal at jwmoore@hwdsb.on.ca, 905-561-2190 or to the Board's Privacy Office at 905-527-5092 x2303

PART A	: STUDI	ENT	INFOR	MATI	ON									
Legal Last Name:			Leg	Legal First Name:				Middle Name			D.O.B. MM/DD/YYYY			
Male [Tele	ohone (H	ome)			Stude	nt Nur	mbe	er (ESIS d	or PowerSchool)	Enre	ollment St	art Date
Female []													
Residence	Status		Country	of Citi	zenship	ip Country of Bir			Birth		Date of En	itry to Canada (YYYY/MM)		
Province of Birth Ontario Entry Date			Date (MM.	re (MM/DD/YYYY) First Langu			_angu	age Spoken		Language	at Home			
Street Address						Apt # City/Town				Postal Code				
OEN #:					-	email address (HWDSB students must use HW			ust use HWDSB account)					
Last School	ol Attende	d												
					-				t co					page of this form.
ш ни	VDSB S	TUDI	ENT				UDEN		<u> </u>		ISA STUDEN NIGHT SCI			ON-HWDSB STUDENT
ENGLISH, HUMANITIES, MATHEMATICS AND SCIENCE COURSES TUESDAYS AND THURSDAYS AT HILL PARK LEARNING CENTRE – 6:00 P.M. TO 9:30 P.M. FULL-CREDIT ONLY: February 26 to May 30, 2019. Final Exam May 28, 2019. Full-disclosure April 23, 2019. Please see page 3 of this form for the course and registration details. PLEASE NOTE: HAMILTON-WENTWORTH DISTRICT SCHOOL BOARD RESERVES THE RIGHT TO CANCEL, COMBINE OR RELOCATE CLASSES DUE TO ENROLMENT. PART B: COURSE SELECTION (EXAMPLE –ENG4U1)														
1 ST CHOICE	1 ST CHOICE 2 ND CHOICE													
PART C:	DAY SO	CHO	OL INFO	ORMA	TION	& AU	THOR	ZAT	101	NS				
Current Da	y School	(if app	olicable):											
Name of Counselor (PRINT) Signature of Counselor							ERVIC	Or SES – PLE	ol Stamp Seal ASE KEEP A COPY OF THIS					
	Name of Principal/Designate (Print) Signature of Principal/Designate ADDITIONAL NOTES:													
PART D:	FOR CO	CE O	FFICE		oy signir		of Parei ee to co							dent (if over 18) hwdsb.on.ca/cce)
DATE OF F	DATE OF REGISTRATION: APPROVED BY CCE COUNSELLOR:													
INFORMAT														

Pupil Eligibility Attestation Form

Date of First Entry to Canada (Year, Month, Day): _

must be completed for all students who don't currently attend an HWDSB Secondary School)					
upil's Legal Names					
Surname	First Name	Middle Name			
Birth Date (Year, Month, Day):	Pu	pil's Country of Birth:			

Type of Citizenship and Immigration Canada Documentation Examined to Verify Eligibility

Gender: Male □ Female □

Туре	Details	Expiry Date (if applicable)	Examined to Verify Eligibility
Canadian Birth Certificate			
Canadian Citizen	Date Pupil became a Citizen:	N/A	
Confirmation of Permanent	Date Pupil became a Permanent		
Residence	Resident:		
Permanent Residence Card	Date (see back of card):		
Pending Permanent Residence	Date Stamped:	N/A	
Card		·	
Study Permit	Date signed:		
Visitor Record	Date signed:		
Consideration of Eligibility	Date stamped:		
(Convention Refugee)			
Passport	Date Stamped:		
Other (please specify)	Date signed/stamped:		

I certify that the information contained on this form is accurate and that I have examined the applicable documentation as indicated.

Student (or Parent/Guardian if student is under 18 years of age)

Name (please print):	
Signature:	
Date:	

School Board or School Official

Name (please print):	
Signature:	
Date:	

NOTES:

- 1. PLEASE READ REGISTRATION AND PROGRAM INFORMATION ON PAGE 3 OF THIS PACKAGE.
- 2. All day school students must have school authorization for every course!
- Continuing Education reserves the right to cancel, combine and/or relocate classes affected students will be notified.
 A refundable \$80.00 Textbook Deposit (CASH ONLY) may be collected on the second day of classes. (if a textbook is required)

VISA STUDENTS must pay in person at the Assessment Centre, 110 King Street West, Plaza Level (above the Jackson Square Food Court). Course fees are applicable. 905- 521-2554



HWDSB - CE

COURSE OFFERINGS

SEMESTER 2 CREDIT NIGHT SCHOOL 2018-2019

TUESDAYS AND THURSDAYS - 6:00 p.m. to 9:30 p.m. at the Hill Park Learning Centre FULL CREDITS ONLY: February 26 to May 30, 2019

All courses are subject to cancellation, relocation.

Course Name	Course Code	Course Name	Course Code	
English		Mathematics		
Grade 12 College English	ENG4C1	Foundations for College Mathematics	MAP4C1	
Grade 12 University English	ENG4U1	Mathematics for College Technology	MCT4C1	
Ontario Literacy Course	OLC401	Advanced Functions	MHF4U1	
Humanities		Calculus and Vectors	MCV4U1	
Challenge and Change in Society	HSB4U1	Science		
		Grade 12 College Chemistry	SCH4C1	
		Grade 12 University Chemistry	SCH4U1	

REGISTRATION DETAILS & FEES

- 1. All HWDSB day school students must register with their Guidance Counsellor, an appointment may be required.
- 2. Non-HWDSB students are required to attend a registration night (below) and to provide a completed registration form authorized by their Principal or Guidance Counsellor.
- 2. A refundable \$80.00 Textbook Deposit (CASH ONLY) may be collected on the second day of classes (if a textbook is required).
- 3. VISA STUDENTS must first visit the Assessment Centre, 110 King Street West (take the escalator to the 2nd level from the Jackson Square Food Court). Course fees are applicable. Call 905-521-2554 for details.

Registration for adult and non-HWDSB students will be held at the Hill Park Learning Centre (465 East 16th Street, Hamilton, Ontario):

Tuesday, February 19, 2019 4:00 to 8:00 p.m.

Thursday, February 21, 2019 4:00 to 8:00 p.m.

NOTES:

- 1. ALL STUDENTS MUST SHOW PROOF OF ADDRESS AND PROOF OF STATUS IN CANADA AT REGISTRATION!
- 2. Students may take only one course per semester through the Night School program.
- 3. Students missing more than three classes may be automatically withdrawn from Night School.

ADULT STUDENT INFORMAT	ION						
Last School Attended:			Diploma Type:				
			(o OSSD o OSIS (pre 1999) o SSGD			
Community Hours Completed Community Hours NOT Complete	O OLC Co		npleted O T Complete O	Previous Credits Earned:			
		Not Requ	•	Diploma Date: (MM/DD/YYY)			
Participant in OW (Worker's Nam	ie):		Doutisinent in	Athon muonuom (Moukou'o Nomo)			
Office Location:	_		Participant in other program (Worker's Name): Office:				
Eligible for 9/10 PLAR o Yes o No		Eligible for 11/12 PLAR O Yes O No		Referred to Assessment Centre:			
Completed:	Complete MM/DD/YYYY		Completed:				