

INTERNATIONAL/INDIGENOUS LANGUAGES ELEMENTARY PROGRAM

JULY 2 TO 26, 2019

PART A: STUDENT INFORMATION

Legal Last Name:		Legal First Name:		Middle Name		D.O.B. MM/DD/YYYY	
Male <input type="checkbox"/>	Telephone (Home)		OEN #:				
Female <input type="checkbox"/>							
Street Address			Apt #	City/Town		Postal Code	
Status: <input type="checkbox"/> HWDSB STUDENT Students with status listed below must also complete a 'Pupil Registration Form' and provide proof of eligibility and Ontario address in person to Hill Park Learning Centre ~ 465 East 16th Street, Hamilton ~ Monday to Friday 8:30 AM TO 4:00 PM <input type="checkbox"/> VISA STUDENT <input type="checkbox"/> NON-HWDSB DAY SCHOOL STUDENT							
Present School		Grade in September 2019		Parent email address			
Parent/Guardian Last Name		Parent/Guardian First Name		Phone Number (Cell)			

PART B: EMERGENCY CONTACT

Last Name		First Name		Relationship	
Home Phone		Cell Phone		Emergency Contact Authorized to pick up student? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Medical Conditions Epi Pen <input type="checkbox"/> Life Threatening <input type="checkbox"/>		Does the student suffer from allergies or other medical concerns? Explain			

PART C: PROGRAM INFORMATION

Please check appropriate box:

<input type="checkbox"/> Ancaster Meadow - Arabic	<input type="checkbox"/> Cootes Paradise – Arabic
<input type="checkbox"/> Cootes Paradise – Simplified / Traditional Chinese <u>AM</u>	<input type="checkbox"/> Cootes Paradise – Simplified / Traditional Chinese <u>PM</u>
<input type="checkbox"/> Dr. E. J. Davey - Arabic	<input type="checkbox"/> Hess Street School – Arabic
<input type="checkbox"/> Hess Street School – Arabic / Sudanese	<input type="checkbox"/> Janet Lee – Arabic
<input type="checkbox"/> Pauline Johnson – Arabic	<input type="checkbox"/> Pauline Johnson – Korean
<input type="checkbox"/> Templemead – Arabic	<input type="checkbox"/> Templemead – Arabic / Urdu
<input type="checkbox"/> Templemead - Kurdish	<input type="checkbox"/> Templemead – Polish

ATTENDANCE: Inform the teacher each day for absences. Please remember, parents are responsible for the timely arrival and departure of their child(ren) each day.

BEHAVIOUR: Students enrolled in International Languages Programs must make every effort to complete both in class work and homework assigned to them. Any lost time and/or assignments must be reconciled with their classroom instructor. Students must be respectful of their instructor, fellow classmates and all other support staff on site at designated schools. Parents will be contacted by the instructor and/or Principal should there be any concerns. Students may be asked to leave the program if there are any concerns. Adherence by all Parties to the HWDSB Code of Conduct is required. See www.hwdsb.on.ca/cce/summer-ile/ for additional program details.

PHOTOGRAPHS: I understand and give consent that any photographs taken at the International Languages Program may be used for promotions.

PROGRAM SPACE IS LIMITED. Continuing Education reserves the right to close, cancel, combine and relocate classes.

I understand the program information outlined above and give permission for my child to attend:

Parent/Guardian Name (please print)	Date	Parent/Guardian Signature
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Office Use Only

Fee: \$5.00	Amount Rec'd	Date received	Staff collected (please print name)	Instructor Assigned
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