

**GRADE 9 – STUDENT REGISTRATION - 2019 / 2020**

**PLEASE COMPLETE ALL SECTIONS AND PRINT CLEARLY**

**STUDENT / ADDRESS INFORMATION**

|  |   |
|--|---|
| Legal Last Name:<br><i>(as indicated on a legal document)</i>  | Legal Given Name<br>& Middle Initial:   |
| Used Surname:  | Used Given Name:  |
| Date of Birth: _____<br><i>Year/month/day</i> <input type="checkbox"/> Male<br><input type="checkbox"/> Female | Telephone: <input type="checkbox"/> Listed<br><input type="checkbox"/> Unlisted |
| Apt./Unit:   | Street Name & No.:  |
| City:  | Postal Code:  |

**CUSTODY INFORMATION**

Who do you live with? Parents  Guardian  Other  Mother  Father

➤ Provide First & Last name(s): \_\_\_\_\_

➤ Indicate who has Custody: Joint  Mother  Father  Guardian  Other

Do you have involvement with any agency? (e.g: Children’s Aid) Yes  No

➤ Please provide name of agency: \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION**

In the event of an emergency, please provide the first and last names of **two** people that we may contact during the school day: *(indicate whether telephone number is home, cell, or business)*

| Name of Emergency Contact | Relationship to Student | Daytime Telephone No. <i>(include area code)</i>  |
|---------------------------|-------------------------|---|
|                           |                         | Home <input type="checkbox"/> Business <input type="checkbox"/> Cell <input type="checkbox"/> |
|                           |                         | Home <input type="checkbox"/> Business <input type="checkbox"/> Cell <input type="checkbox"/> |

**MEDICAL INFORMATION**

Family Doctor’s Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Ontario Health Card Number *(10 digits followed by 2 letters)* \_\_\_\_\_

Do you have any medical, allergy, or dietary conditions to be observed? Yes  No  *(If yes, please list below)*

**STATUS IN CANADA**

What is your Status in Canada? *(Please indicate your status with an X in the appropriate box)*

- |  |  |
|--|--|
| <input type="checkbox"/> Awaiting Refugee Status | <input type="checkbox"/> Canadian Citizen  |
| <input type="checkbox"/> Native Ancestry         | <input type="checkbox"/> Permanent Resident under the Immigration Act                            |
| <input type="checkbox"/> Visa Student            | <input type="checkbox"/> In Canada under the authority of another Visa under the Immigration Act |
|  | <input type="checkbox"/> Refugee   |

What country were you born in? \_\_\_\_\_

What is your country of Citizenship? \_\_\_\_\_

If you were not born in Canada, when did you arrive in Canada? **Year:** \_\_\_\_\_ **Month:** \_\_\_\_\_

What is your first language spoken in the home? \_\_\_\_\_

**Please Affix a Label for:**  
 > Student Name  
 > HWDSB Student Number  
 > OEN

**GRADE 9 – FRENCH IMMERSION COURSE SELECTIONS – 2019 - 2020**

**SURNAME:** \_\_\_\_\_  
 (please print clearly)

**FIRST NAME:** \_\_\_\_\_  
 (please print clearly)

**CURRENT SCHOOL:** \_\_\_\_\_

To graduate with a certificate in French Immersion, students must successfully complete the sequence of four courses in French Immersion and a minimum of six courses in other subjects taught in French. Students should plan to take a **minimum of 4 French instruction courses in grade 9** and 4 French instruction courses in grade 10 to meet this requirement.

**REQUIRED COURSES** (choose 6 “Required” courses at the appropriate level – one from each subject)

| SUBJECT   | ENRICHED                         | ACADEMIC  | APPLIED  | ELEMENTARY RECOMMENDATIONS       |   |   |
|---|----------------------------------|---|--|----------------------------------|---|---|
| English   | <input type="checkbox"/> ENG1D1E | <input type="checkbox"/> ENG1D1                                     | <input type="checkbox"/> ENG1P1  | <input type="checkbox"/> ENG1D1E | <input type="checkbox"/> ENG1D1                                     | <input type="checkbox"/> ENG1P1                                     |
| Mathématiques <b>OR</b><br>Math (English instruction)   | <input type="checkbox"/> MPM1D1E | <input type="checkbox"/> MPM1D1I<br><input type="checkbox"/> MPM1D1 | <input type="checkbox"/> MFM1P1I<br><input type="checkbox"/> MFM1P1  | <input type="checkbox"/> MPM1D1E | <input type="checkbox"/> MPM1D1I<br><input type="checkbox"/> MPM1D1 | <input type="checkbox"/> MFM1P1I<br><input type="checkbox"/> MFM1P1 |
| Sciences <b>OR</b><br>Science (English instruction)   |                                  | <input type="checkbox"/> SNC1D1I<br><input type="checkbox"/> SNC1D1 | <input type="checkbox"/> SNC1P1I<br><input type="checkbox"/> SNC1P1  |                                  | <input type="checkbox"/> SNC1D1I<br><input type="checkbox"/> SNC1D1 | <input type="checkbox"/> SNC1P1I<br><input type="checkbox"/> SNC1P1 |
| French Immersion  |                                  | <input type="checkbox"/> FIF1D1I                                    | <input type="checkbox"/> FIF1P1I   |                                  | <input type="checkbox"/> FIF1D1I                                    | <input type="checkbox"/> FIF1P1I                                    |
| Géographie du Canada  |                                  | <input type="checkbox"/> CGC1D1I                                    | <input type="checkbox"/> CGC1P1I   |                                  | <input type="checkbox"/> CGC1D1I                                    | <input type="checkbox"/> CGC1P1I                                    |
| Health & Physical Education<br><i>Healthy Active Living Education – For All</i><br><i>Healthy Active Living Education - Female</i><br><i>Healthy Active Living Education – Male</i><br><i>Large Group Activities (Soccer, co-ed)</i><br><i>Large Group Activities (Ice Games, co-ed) \$500.00 approx.</i> |                                  |   | <input type="checkbox"/> PPL1O1<br><input type="checkbox"/> PPL1O1F<br><input type="checkbox"/> PPL1O1M<br><input type="checkbox"/> PAL1O1S<br><input type="checkbox"/> PAL1O1H ( <b>2.0 credits = 2 courses PAL1O1 &amp; HIF1O1</b> ) |                                  |   |   |

**OPTIONAL COURSES** (choose 2 “Optional” courses) **NOTE:** Students taking PAL1O1H & HIF1O1H choose 1 only.

| SUBJECT  | OPEN  |
|--|---|
| Drama  | <input type="checkbox"/> ADA1O1   |
| Music – Instrumental   | <input type="checkbox"/> AMU1O1B (beginner)<br><input type="checkbox"/> AMU1O1E (experienced) |
| Arts Visuels (French Immersion) <b>OR</b><br>Visual Arts (English)                                     | <input type="checkbox"/> AVI1O1I <b>OR</b><br><input type="checkbox"/> AVI1O1                 |
| Information & Communication Technology   | <input type="checkbox"/> BTT1O1   |
| L’Exploration Des Études Familiales (French Immersion) <b>OR</b><br>Exploring Family Studies (English) | <input type="checkbox"/> HIF1O1I <b>OR</b><br><input type="checkbox"/> HIF1O1                 |
| Exploring Technologies   | <input type="checkbox"/> TIJ1O1   |

**ELEMENTARY ADMINISTRATIVE USE ONLY**

**Indicate with an X if student has Individual Education Plan (IEP)**

- Non-exceptional
- Exceptional – state identification:

**Recommended for:**

- Jump Up Math Course (GLS1O1 – Learning Strategies - Skills for Success)
- Empower Reading Course

\_\_\_\_\_  
 Grade 8 Teacher’s signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Grade 8 Principal’s signature

\_\_\_\_\_  
 Date

By checking the Consent to Photograph box below, I agree that my child’s photograph or image can be used in future promotional and/or informational brochures; posters; newsletters; media information; yearbooks; web pages; videos and advertisements for the Hamilton-Wentworth District School Board.

**Consent to photograph**

\_\_\_\_\_  
 Parent / Guardian signature

\_\_\_\_\_  
 Date