

**Allan Blakeney Adult Campus – Night School 2017/2018
REGISTRATION FORM**

(Please Print)

DATE OF REGISTRATION:		STUDENT # _____					
STUDENT INFORMATION							
Student's Legal Last Name:							
Student's Legal First Name:							
Student's Middle Name:		Date of Birth		Age	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Unspecified		
		Month _____ / Day _____ / Year _____					
Student Address:		City or Town	Province	Postal Code			
Home Phone:	Cell Phone:	Current Email Address:					
Have you previously attended Night School? <input type="checkbox"/> Yes <input type="checkbox"/> No		Presently Attending School <input type="checkbox"/> Yes <input type="checkbox"/> No	Last High School Attended When:	Last Grade Completed			
When:		Where:	Where:				
Are You: <input type="checkbox"/> Upgrading <input type="checkbox"/> Completing Grade 12 <input type="checkbox"/> Adult Grade 12 <input type="checkbox"/> Never taken <input type="checkbox"/> Other							
CITIZENSHIP STATUS							
<input type="checkbox"/> Canadian Citizen		<input type="checkbox"/> *Landed Immigrant/*Permanent Resident (see note below)					
Country of Birth:		Country of Birth:					
Country of Origin:		Country of Origin:					
Country of Citizenship:		Country of Citizenship:					
You will be required to provide a Permanent Resident Card or proof of Canadian Citizenship at the time of registration.							
ABORIGINAL STATUS							
<p>Information on Aboriginal ancestry is collected to inform educational services and program decisions at the local and provincial levels. Self-declaration is voluntary and is not mandatory. Schools are required to provide students with the opportunity to self-declare their ancestry. The following information is collected for the Ministry of Education and disclosure is protected under <i>The Local Freedom of Information and Protection of Privacy Act</i> and all employees of Regina Public Schools must adhere to <i>Administrative Procedure 405</i>.</p> <p>Aboriginal people are those who identify themselves to be First Nations/Registered/Status, First Nations/Non-Registered/Non-Status, Métis, or Inuit. Based on this definition, do you consider yourself to be an Aboriginal person? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes, please specify the Aboriginal group to which you belong:</p> <p><input type="checkbox"/> First Nations/Registered/Status <input type="checkbox"/> First Nations/Non-Registered/Non-Status <input type="checkbox"/> Métis <input type="checkbox"/> Inuit</p>							
Band Affiliation: (optional)		Status Number: (optional)					
EMERGENCY CONTACT							
Name of friend or relative:		Relationship to student:	Home Phone	Cell Phone			
COURSE SELECTION							
<input checked="checked" type="checkbox"/> Choose one	Course #	Mondays/Wednesdays 6:15 pm to 9:30 pm January 29, 2018 – May 16, 2018		<input checked="checked" type="checkbox"/> Choose one	Course #	Tuesdays/Thursdays 6:15 pm to 9:30 pm January 30, 2018 – May 17, 2018	
<input type="checkbox"/>	8017	English A30		<input type="checkbox"/>	8018	English B30	
<input type="checkbox"/>	8426	Pre-Calculus 30		<input type="checkbox"/>	6425	Foundations of Math 20	
<input type="checkbox"/>	8255	Biology 30		<input type="checkbox"/>	8425	Foundations of Math 30	
<input type="checkbox"/>	8257	Physics 30		<input type="checkbox"/>	6426	Pre-Calculus 20	
<input type="checkbox"/>	8307	Social Studies 30		<input type="checkbox"/>	8421	Calculus 30	
				<input type="checkbox"/>	8256	Chemistry 30	
REGISTRATION FEES							
<input type="checkbox"/>	No Fees	Students who are not registered in another school, and are under 22 years of age as of September 30.					
<input type="checkbox"/>	\$500.00 per class	Students who are registered at another school, and are under 22 years of age as of September 30.					
<input type="checkbox"/>	\$500.00 per class	All students 22 years of age and older as of September 30					
FOR OFFICE USE ONLY							
<input type="checkbox"/>	Powerschool	<input type="checkbox"/>	Withdrawn	Date:	<input type="checkbox"/>	Cash	Amount Paid:
<input type="checkbox"/>	Ministry of Education	<input type="checkbox"/>	No Show		<input type="checkbox"/>	Debit	Receipt #:
<input type="checkbox"/>	Fees Entered	<input type="checkbox"/>	Refund	Date:	<input type="checkbox"/>	Visa	Confirmation letter <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/>	Timetabled			Date:	<input type="checkbox"/>	Mastercard	
Notes:					Proof of Citizenship provided <input type="checkbox"/> Yes <input type="checkbox"/> No		
Student/Guardian signature							