

## Allan Blakeney Adult Campus - Night School 2019/2020 REGISTRATION FORM

(Please Print)

DATE OF R	REGISTRAT	ION:						s	TUDENT	#					
Student's	Legal Last	Name:			STUDE	<b>T</b>	INFORM	AT:	ION						
Student's	Legal First	Name:													
Student's	Middle Nan	ne:				Dat	Date of Birth							Male Female	
Student A	ddress:						Month/Day/Year City or Town Province					☐ Unspecified Postal Code			
Home Pho	ne:			Cell Phone:		Cur	rent Email	Add	lress:						
Have you p	previously	attended N	ight S	School? ☐ Yes ☐	l No		Presently Attending School								
When:							here:		Where:			oompiotou.			
Are You:	□ Upgrad	ding 🗆 Co	omple	eting Grade 12	☐ Adult G	Grade	e 12 🔲 N	leve	r taken		Other				
					CITIZ	ENS	SHIP STA	<b>NTU</b>	JS						
□ Canadia	an Citizen					<b>□</b> *	Landed In	nmi	grant/*P	erma	nent Resident (s	ee note	belo	w)	
Country of	Birth:					Country of Birth:									
Country of	Origin:					Country of Origin									
Country of	Citizenshi	p:				Country of Citizenship:									
	*You wi	ll be requir	ed to	provide a Perma	nent Resi	dent	Card or pr	oof	of Canad	lian C	Citizenship at the	time of	regi	stration.*	
					ABOR	RIGI	INAL STA	۱TU	IS						
voluntary is collected	and is not not for the Minis	nandatory. S stry of Educa	chools ation a	are required to pr	ovide stude otected und	ents v Ier <i>Ti</i>	vith the oppo the Local Fre	ortu	nity to self	f-decla	ocal and provincial are their ancestry. In and Protection of	The follow	/ing	information	
Based on the If <b>Yes</b> , plea	nis definition	, do you con he Aborigina	sider y I grou	yourself to be an A p to which you belo	boriginal pe ong:	erson		'es	□ No	)	n-Registered/Non-S	tatus, Mé		r Inuit.	
Band Affil	iation: (opt	ional)					9	Stat	us Numb	<b>er</b> : (0	ptional)				
					EMED	CEN	ICY CON	TA	<b>○T</b>						
Name of friend or relative:					Relationship to student: Home Phone					one	Cell Phone				
				COUF	RSE SEL	ECT	TION – S	SEM	1ESTER	1					
Choose one	Course #		6:1	lays/Wedneson 5 pm to 9:30   9 - Decembe	days pm		Choose one	T	Course #		Tuesda 6:15 pr eptember 10 -	n to 9:	30	pm	
	8017	English			10, 20	19			8018		ish B30	- Dece	יטוווי	EI 12, 2019	
	8426	Pre-Cal									ndations of M	lath 20			
	8255	Biology	30						8425	Fou	ndations of M	lath 30			
	8257	Physics									Calculus 20				
	8307	Social S	tudi	es 30							culus 30				
					DEGI	<b>6</b>				Che	mistry 30				
		<b>6</b> 1 1		<u>.</u>			RATION F							_	
□ No Fe		Septem	ber	30.							e under 22 ye				
□ \$500. per cl		Student			ered at a	not	her scho	OI,	and are	e un	der 22 years (	of age a	as (	of	
		*Note:	Stu	dents 22 year	s of age	and	d older w	/ill	not be	perr	nitted to regi	ster fo	r Ni	ght School.	
					FOR O	FFT	CE USE	OM	II Y						
	Powerschoo	l		Withdrawn	Date:			Ca			Amount Paid:				
	Ministry of E	ducation		No Show					ebit		Receipt #:				
	Fees Entere	d		Refund	Date:			Vis	sa		C	5.7		D.N.	
	Timetabled				Date:			Ma	astercard		Confirmation lett	er □ Ye	:5	□ No	
Notes:							'								
Studen	t/Guar	dian sid	ınat	ture X								Ov	/er		

Form 3



## Authorization for Guidance Counsellors to Access Student Information

for students not enrolled in the school

STUDENT INFORMATION	
Birthdate	Learning ID
Day Month Year	
Last Name	
First Name	net-t-ti- st
riist Naille	Middle Name
	*
Permission is granted to:	
	II T CAMPLIC
ALLAN BLAKENEY A	JLI CAMPUS
School/Institution Name	
to access my accedancia na condition the	tudent Date System during the selection 2019/2020
to access my academic record in the (check the appropriate box below and init	student Data System during the school year
up to September 30	□ up to April 30
□ up to November 30	t Vup to June 30
Initial	Initial
□ up to February 28	
Initial	
for the purpose of:	
determining secondary level p	ogramming (Gr. 10-12)
	Day Month Year
	7
Student or parent/guardian (if student is	Signature
under 18 years of age and not present)	Day Month Year
	, very worth rear

If consent cannot be obtained, please contact Student and Educator Services at <a href="mailto:student.records@gov.sk.ca">student.records@gov.sk.ca</a> before accessing the student's information.

This form must be kent on file at the school for a minimum of five years in a secure.

This form must be kept on file at the school for a minimum of five years in a secure but accessible location in the event of an audit.

November 2017