

Allan Blakeney Adult Campus - Night School 2017/2018 REGISTRATION FORM

(Please Print)

DATE OF	REGI	STRATI	ON:				STUDENT #										
						STUDE	TI	INFORM	AT]	ION							
Student's Legal Last Name:																	
Student's Legal First Name:																	
Student's Middle Name:								Date of Birth						_	Male Female		
Student Address:												Year Province	Deetel Ce	_	Unspecified		
Student Address:																	
Home Phone: Cell Phone:								Current Email Address:									
Have you previously attended Night School? ☐ Yes ☐ No When:															Last Grade Completed		
Which:							Where:										
Are You: 🔲 Upgrading 👊 Completing Grade 12 👊 Ad							irad	e 12 🔲 N	eve	r taken		Other					
						CITIZ	EN:	SHIP STA	١TU	IS							
□ Canad	□ Canadian Citizen □ *Landed Immigrant/*Permanent Resident (see note below)																
Country	of Birt	th:					Country of Birth:										
Country								Country of Origin									
Country o		•						Country of Citizenship:									
You will be required to provide a Permanent Resident Card or proof of Canadian Citizenship at the time of registration. AROPIGINAL STATUS															stration.*		
ABORIGINAL STATUS Information on Aboriginal ancestry is collected to inform educational services and program decisions at the local and provincial levels. Self-declaration is																	
Information on Aboriginal ancestry is collected to inform educational services and program decisions at the local and provincial levels. Self-declaration is voluntary and <u>is not</u> 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> .																	
									s, Fi	irst Natior	ns/Nor	n-Registered/Non-S	tatus, Métis	5, 0	r Inuit.		
					ourself to be an Al		erson	i? 🔲 Y	es	□ No	ס						
If Yes, please specify the Aboriginal group to which you belong: ☐ First Nations/Registered/Status ☐ First Nations/Non-Registered/Non-Status ☐ Métis ☐ Inuit																	
Band Affiliation: (optional) Status Number: (optional)																	
								NCY CON									
Name of friend or relative:							nshi	ip to studer	nt: Hor		me Phone		Cell Phone				
						COUF	RSE	SELECT	IO	N							
Choose one #			ϵ	ays/Wedneso pm to 9:30 p	pm	Choose one #			Tuesdays/Thursdays 6:15 pm to 9:30 pm				pm				
		2017	September 11-December 20 English A30				17				September 12	-Decem	be	r 14, 2017			
									6425		English B30 Foundations of Math 20						
			Pre-Calculus 30 Biology 30									dations of Math 30					
	_		Physics 30				7 7 7				e-Calculus 20						
			Social Studies 30							-	culus 30						
								□ 8256 Chemistry 30									
						REGI	STE	RATION F	EE	S		•					
□ No F	REGISTRATION FEES No Fees Students who are not registered in another school, and are under 22 years of age as of September 30.																
□ \$500.00 per class			-	wł	no are registe	red at a	not	her scho	ol,	and ar	e un	der 22 years	of age a	s c	of		
\$500.00 per class All students 22 years of age and older as of September 30																	
								OF 1:5-	<u> </u>								
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		erschool			Withdrawn	Date:	0 (Amount Paid:					
	_	stry of Ed			No Show		□ Debit			11000-							
☐ Fees Entered ☐ Timetabled					Refund	Date:				Visa		Confirmation letter Yes No			□ No		
1						Date:			Ма	astercard							
Notes:																	
Stude	nt/C	Guard	lian siqı	nat	ure												