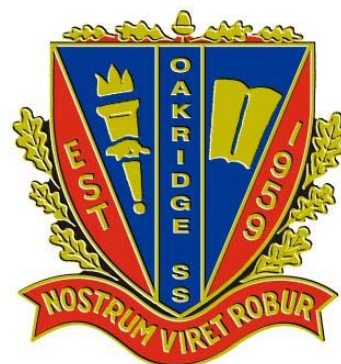


Oakridge Secondary School

1040 Oxford Street W.

London, ON N6V 1M4

519-452-2750



Grade 9 **Out of Area** Registration Form

School Year: 2020-2021

Student Name:	
Student Birthdate:	
Student OEN:	
Previous School Name:	

PLEASE NOTE: Registration Deadline is February 14, 2020

Students under 18 require a parent/guardian present at their registration interview.

Students registered in a TVDSB school are reminded to keep their student information up-to-date in their current school in order to have the records up-to-date when the information is transferred to Oakridge over the summer. Transportation to and from school is solely the responsibility of the student.

For course descriptions and selections refer to the course selection guide on our website:

www.tvdsb.ca/oakridge

Principal: Mr. M. Phillips

Vice Principal: Mrs. L. Denning

School Use Only:

Parents must provide ORIGINAL DOCUMENTS for viewing to Oakridge staff.

- Proof of Age (i.e. Canadian Birth Certificate, Passport or Immigration documents)
- Proof of Canadian Citizenship or Permanent Resident
- Proof of Address (i.e. Current Utility bill) – Driver's License is not acceptable
- Copy of IEP (individual education plan) - if applicable
- Letter from TVDSB Finance Dept. confirming non-resident fees have been submitted
- First Date of Entry into Canada form and relevant immigration documentation (Students born outside of Canada)
- ROAC paperwork (International/Out of Province students)
- Custody documents (if applicable)

Thank you for choosing Oakridge Secondary School



Student Registration Form

School Student Enrolling At: _____

SCHOOL USE ONLY

Trillium No. _____

Teacher _____

OEN _____

Grade/Homeroom _____

Admit Date _____

Signature School Staff: I certify that the information contained on this form is accurate and that documentation has been verified

Admission Status Pupil of the Board Other Pupil

STUDENT INFORMATION

Legal Last Name _____

Preferred Last Name _____

Legal First Name _____

Preferred First Name _____

Legal Middle Name _____

Date of Birth (DD/MM/YY) _____

Gender: Male Female

Proof of Birth: Birth Certificate Baptismal Certificate
 Passport Registration of Birth

Home Phone # (____) ____-____ Unlisted Yes No

Siblings Attending this School _____

First Language Learned in the Home _____

Indigenous Self-Identification First Nation Métis Inuit

Languages Spoken at Home _____

CITIZENSHIP

Canadian Citizenship City of Birth _____ Province _____

If student not born in Canada: Country of Last Residence _____ Country of Citizenship _____

Date student entered Canada for the first time to live (DD/MM/YY) _____ First Date of Entry into Canada Form Complete

STUDENT ADDRESS

Home Address _____

Proof of Address

Street # Street Name Apt#

- Current Agreement of Purchase and Sale/Lease Agreement
- Current Utility Bill
- Current Property Tax Bill
- Current Home Phone/Cable/Internet Bill
- Other: please specify * _____

City/Town/Municipality Postal Code

Note: *Driver's license is not acceptable for audit purposes.

PREVIOUS SCHOOL INFORMATION

Name of School _____

Program Instruction Regular Specialized Program

Name of Board _____

(Describe) _____

Town/Province/Country _____

Grade Last Attended _____

Last Date Attended _____

ESL IEP IPRC

Language of Instruction English French Other

OEN _____

PARENT/LEGAL GUARDIAN INFORMATION

Custody Information Both Parents Mother Only Father Only Shared Joint Guardian CAS

Legal Guardian Both Parents Mother Only Father Only Guardian Other CAS

Access to Records Both Parents Mother Only Father Only Shared Joint Guardian CAS

Living with Both Parents Mother Only Father Only Guardian Other CAS

Written Custody Agreement, or Court Order Provided Guardianship: Custody Agreement, or court order Provided

If there is no Custody Agreement, then all the following criteria must be met (check Yes or No) in order for the child to attend school without the payment of a tuition fee. If a response of "No" is indicated please refer student to International Admissions:

Yes No The student is a Canadian citizen or a permanent resident of Canada.

Yes No The guardian is a member of the student's immediate family and resides in Ontario in the school board jurisdiction in which the student wants to attend school. Immediate Family Relationship (please specify): _____

Yes No The guardian is assuming full responsibility for the care and well-being of the student, and the student is residing with the guardian through the custody period.

Yes No A written agreement is in place between the parents of the student and the guardian that sets out all of the above, as well as the respective responsibilities of the parents and the guardian.

Parent/Guardian: Relationship to Student _____ Cell Phone _____

First Name _____ E-mail _____

Last Name _____ Employment/Phone _____

Home Address _____ Contact Priority: Sickness/Medical First Second Third

Home Phone: _____ Emergency/Early School Closure First Second Third

Parent/Guardian: Relationship to Student _____ Cell Phone _____

First Name _____ E-mail _____

Last Name _____ Employment/Phone _____

Home Address _____ Contact Priority: Sickness/Medical First Second Third

Home Phone: _____ Emergency/Early School Closure First Second Third

Other (Please Specify): _____ Cell Phone: _____

First Name _____ E-mail _____

Last Name _____ Employment/Phone _____

Home Address _____ Contact Priority: Sickness/Medical First Second Third

Home Phone: _____ Emergency/Early School Closure First Second Third

It is the parent/guardian's responsibility to provide the school with written notification of relevant health and custody access information. For every student an Ontario Student Record (OSR) folder is maintained. This is a record of the student's school history and as such is a very significant document. Student's, parents/guardians of students under the age of 18, unless has been denied by a court order, have access to the OSR and are encouraged to confer with school officials regarding its contents. The above information has been provided with the approval of the individuals listed.

Parent/Guardian (Print Name) _____ Signature _____ Date (DD/MM/YY) _____

Notice of Collection: The personal information provided on this form and any other correspondence relating to involvement in Board programs is collected by the Thames Valley District School Board under the authority of the Education Act and Regulations (R.S.O. 1990 cE.2) as amended. The information will be used to register the student in a school, for the collection of applicable student/activity fees, as well as for any consistent purpose. Information is shared with employees such that they may carry out their job duties. In addition the information may be used or disclosed to comply with legislation, for compelling circumstances affecting health and safety or discipline, as required in circumstances related to law enforcement matters, or in accordance with an other Act. For questions about this collection, contact the Board's Freedom of Information Coordinator, Thames Valley District School Board, 1250 Dundas Street, London, ON N6A 5L1, Telephone 519-452-2000 ext. 20218.

Oakridge Secondary School

GRADE 9 COURSE SELECTION CHART 2020 – 2021

Student Signature: _____	Parent Signature: _____
Is student on an IEP? Please check one YES <input type="checkbox"/> NO <input type="checkbox"/>	

COMPULSORY COURSES					
Students must take the following compulsory courses. For physical education, please circle female or male. For the other (5) courses, parents are requested to consult with the grade eight teacher and then circle ACADEMIC, LOCALLY DEVELOPED or ENRICHED.					
COURSES	ACADEMIC	APPLIED	LOCALLY DEVELOPED	ESL	ENRICHED
Canadian Geography	CGC1D1	CGC1P1			CGC1DE
English	ENG1D1	ENG1P1	ENG1L1	ESLC01/DO1/EO1	ENG1DE
French	FSF1D1	FSF1P1	FSF141		FSF1D9
Mathematics	MPM1D1	MFM1P1	MAT1L1		MPM1DE
Science	SNC1D1	SNC1P1	SNC1L1		SNC1DE
Physical Education	(Circle One)		FEMALE PPL 10F	MALE PPL 10M	

Students who have applied for the **Preparatory IB Program please check box.
 (ENG1D6, FSF1D6, CGC1D6, SNC1D6, MPM1D6)

BUNDLED COURSES	
COURSES	COURSE CODE
AVI10K + MFM1PK	ARMA1P
AVI10K + MPM1DK	ARMA1D

OPTIONAL COURSES		
Students must also register for TWO optional courses. Please rank your choices from 1 – 3 (1 represents your FIRST choice followed by 2 and 3). Every effort will be made to accommodate your first TWO preferences.		
COURSES	COURSE CODE	RANK ORDER
Drama	ADA101	
Dance	ATC101	
Music – Instrumental	AMI101	
Music – Vocal	AMV101	
Visual Arts	AVI101	
Information and Communication Technology in Business	BTT101	
*Learning Strategies (see below)	GLE101	
Learning Strategies	GLS101	
Exploring Family Studies	HIF101	
Exploring Technologies	TIJ101	

*Learning Support Teacher suggests student on an IEP to be considered for GLE101 Please check one YES NO

Learning Support Teacher signature approving course selection: _____
Print Name Signature

Repertoire Band (AMR2OB) & Repertoire Choir (AMR2OV)
 Grade 9 students can earn an extra ½ credit(s) by taking Repertoire Band (AMR2OB) and/or Repertoire Choir (AMR2OV). These credits are in addition to the 8 credits that students MUST take in grade 9 and will be scheduled either before or after school twice per week for the entire school year (September-June).
 If you wish to register for the additional ½ credit in **Repertoire Band**, please circle the following: **AMR2OB**
 If you wish to register for the additional ½ credit in **Repertoire Choir**, please circle the following: **AMR2OV**