

REGISTRATION FORM

Specialist High Skills Major – Information and Communications Technology

Personal Information: *Please print neatly and provide the information below.*

| Legal Name: | | | |
|--|-------------------------|-------------------------------------|----------------|
| Current School: | | First Name | Middle Initial |
| | | Student ID #: | |
| Home Address: | | | |
| City/Town: | | Postal Code: | |
| Home Telephone: | Cell: | E-Mail: | |
| Which pathway do you plan to pursu | e? (Please check one.) | | |
| ☐ Apprenticeship Training ☐ Work | place 🖵 College | University | |
| Are you currently enrolled as an OYA | P student? Yes | □ No | |
| Have you taken or are you currently e | enrolled in any Dual (| Credit courses? Yes No | |
| • | ed: 🖵 Yes 🖵 No | lamees, provide date of completion: | |
| All students registered in a Specialist | High Skills Major mu | ıst take Co-op. | |
| Have you ever taken Co-op? | If Yes, when? | | |
| If No, are you planning on taking Co-op? | Summer prior to Grade 1 | 1 Grade 11 Grade 12 | |
| Student's Signature | Prin | t name (Student) | Date |
| Parent/Guardian Signature | Print nar | me (Parent/Guardian) | Date |

Once you have completed the Registration Form, please submit it to the Guidance Department at your school for processing. A member of the SHSM team will be in contact with you shortly to set up your file and get you started on your journey to success.

In accordance with the Municipal Freedom of Information and Protection of Privacy Act, personal information is being collected under the authority of the Education Act and will be used to register students in a Specialist High Skills Major. For more information, please contact the Principal.

Congratulations on choosing an exciting future!

School Contact Information:

SHSM.rainbowschools.ca