

HALTON CATHOLIC DISTRICT SCHOOL BOARD BISHOP REDING CATHOLIC SECONDARY SCHOOL

Pre-Admission Questionnaire/Checklist

Please read carefully:

The form must be completed in full and returned along with the appropriate documents.

Please note that pupils attending a Catholic secondary school are expected to complete a Religion credit for each year of attendance and attend all religious ceremonies.

SECTION A	
Student Name:	Date of Birth (mm/dd/yyyy):
Address:	Postal Code:
Home Phone #:	Current Grade:
Current School:	Board: ☐ HCDSB ☐ Other

<u>SECTION B</u> Pupil registration can only be considered when the following information is attached.

Please return this completed form and the indicated documents to the Guidance Office at the booked Registration appointment.

PERSONAL DOCUMENTATION	FOR SCHOOL USE ONLY	
	RECEIVED	NOT RECEIVED
1. Copy of Canadian Birth Certificate or Proof of legal status in Canada		
2. Proof of residence (i.e. utility bill, rental agreement)		
3. Proof of Guardianship and/or custody if not living with both parents		
(Legal Guardian documentation)		
4. \$65 Student Activity Fee ~ payable by on-line payment		
(available after registration). Please provide an email address.		

SCHOOL DOCUMENTATION FOR SCHOOL USE		L USE ONLY
	RECEIVED	NOT RECEIVED
Most recent report card		
2. Credit Counselling Summary or Transcript (if currently in high school)		
3. IEP – if applicable		
4. Online Registration Form Completed		
5. OSSLT Results (requirement completed)		
6. Course Option Form (course selections)		
7. Freedom of Information Consent (Section D)		
8. CONSENT form (ALL areas) OR Agreements from OLR		
9. Direction of School Support (Tax form)		

SECTION C TO BE COMPLETED BY THE PRINCIPAL OR DESIGNATE of CURRENT/LAST SCHOOL ATTENDED

Has the pupil had ESL support?		Yes □ No □			
Is this student currently under suspension/expulsion	Board? Yes□ No□				
Did the student participate on a school athletic team? Please note a school transfer could affect eligibility to participate on a team within the Halton Catholic Athletic Association (HCAA).					
Does this pupil have and IEP or been presented a lf yes, please briefly explain by listing the exception education or program modifications/accommodations/	onality and any spe				
Principal/VP Name:(please print)		Title:			
Signature:	_ Phone:	Date:			
SECTION D FREEDOM OF INFORMATION	ON				
Notice to Parents:					
Information contained herein is pursuant to the Education purposes such as:	tion Act. It may be d	lisclosed beyond the Board for			
 Catholic School Council activities Class lists, emergency phone networks, transp In case of an accident or witness to an accident the Board's insurer The release of photographs, artwork, writing or publicity The use of names, photographs, etc. used for eschool/Board website 	nt, the pupil's name a	and home address will be released to o the media (print/electronic) for			
If you do not consent to the release of information for t within 20 days.	hese purposes, plea	ase inform the Principal in writing			
I have read and understand the uses that may be mad consent to allow that information to be used as stated	-	formation on my child, and provide			
Parent/Guardian Signature:		Date:			

Personal information contained on this form is collected pursuant to the *Education Act* and the *Municipal Freedom of Information and Protection of Privacy Act*.

Questions about the collection and the use of this personal information should be directed to the Halton Catholic District School Board, 802 Drury Lane, P.O. Box 5308, Burlington, Ontario L7R 4L3