

CtK SHSM



Contract & Consent Form 2024-25

CACELLERS FAITH COURAGE			01111 2			
First Name			Last Name			
Grade	e		Program			
Pathways (Circle one)	University C		ollege A		prenticeship	Workplace
Student Email			Guardian Er	mail		
Student cell			Guardian Cell			
Home School			Career Goal			
Diploma and ALL SHSM Seal. Requirements for a 4 M. Eng Indu Rea Sec Two Your signature be Services to official also allow Studen	ajor Credit Courses + dish and Math Courses ustry Certification and ach-Ahead and Career stor Partnered Concept o Co-op credits (SHSM elow (both student and ally enroll you into to the of Services to make an	1 Electives (2 Mathematics Training tualized Internshold Internshold parent/gate Specially necessions)	re (Other) In required for the tion Activities Experience (1 nip) In guardian) will in the tion alist High Skills ary timetable	Busin (Field -day ndica iills M adjus	ith the Red less SHSM only) I Trip, Guest Spe Experiential Lead Ite your permissi Iajor program of stments.	eakers, etc.) rning Opportunity) on for Student
Please print (Guard	dian name)			Date:		
Guardian's Signature:						
SHSM Lead Signature:			Date:			
☐ Accepted			Office Use Only			
Please return thi	is form to:		D -(- D	•	an da	

Mark De Cicco deciccoma@hcdsb.org Christ the King Catholic Secondary School Date Received:

Guidance Signature: _____