

Downsview Secondary School

Advantage Programs



Dear Parent/Guardian:

If one of the Downsview Secondary School **Advantage Programs** will be the program of choice for your son/daughter, please ensure all the "Required Forms" are completed and returned to Downsview Secondary school by 4:00 pm **January 30, 2015.**

Students selecting any one of the Downsview Secondary School **Advantage Programs** may return their applications directly to Downsview Secondary School at 7 Hawksdale Road or return their application through the Board Mail. Please consult with your elementary school regarding Board Mail.

The following forms must be completed and included in the submitted package:

- 1. One Letter of Application (The letter should be no more than 2 pages in length and should explain why the student is interested in entering any of the Downsview Secondary School Advantage Programs and why they believe that they will be successful in the program.)
- 2. One Optional Attendance Form
- 3. One copy of the most recent Grade 8 Report Card.
- 4. One Application Form (enclosed)
- 5. Any applications received for the STEM Advantage program will also be required to complete a STEM entrance test. Once all applications have been received parents will be contacted with the date of the entrance test.

We will notify all students of their admission status by **February 12, 2015.**

If you require more information about the grade 9 Application process please do not hesitate to contact Lorianne Stuckless (Assistant Curriculum Leader of Student Services) at 416-395-3200 ext. 20041.



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Please check the Downsview Advantage Program your child will be applying to. You may choose to combine programs but will need to consult our guidance team regarding the combination. ☐ DSS **Africentric** Advantage ☐ DSS **Arts** Advantage ☐ DSS **STEM** Advantage ☐ DSS **Leadership** Advantage (Science, Technology, Engineering and Math) A: PERSONAL INFORMATION (Please Print) Student's Family Name: _____ Given Name: ____ Initial: ____ Student Number: _____ Birthdate: ____ (Month / Day / Year) Parents/Guardians Name: _____ Email: _____ Name: _____ Email: _____ Address: (City) (Apt. #) (House# and Street) (Postal Code) Telephone Numbers: ______ (home) (work) (cell) Parent/Guardian Signature: _____ **B: CURRENT SCHOOL INFORMATION** Current School Name: Current French Program: ☐ Core ☐ Extended ☐ Immersion ☐ None

Collection of Personal Information

Personal information contained on this form or personal information collected on behalf of the Toronto District School Board is collected under the authority of the Education Act and in compliance with sections 14, 31 and 32 of the Municipal Freedom of Information and Protection Act, 1989. This information is required to register and place the student in the school system, or for consistent purpose such as the allocation of staff and resources.