



Registering at Jarvis Collegiate Institute Grades 10-12

Documents to Register at Jarvis C.I.

416-393-0140

Please bring original documentation with you to the school.

1. Proof of age of student. Any **one** of: Birth Certificate, Baptismal Record, Canadian Passport/Citizenship Card, Refugee Claimant papers, Confirmation of Permanent Residence, Permanent Resident Card, or TDSB School Admission Letter.
2. Proof of Address for Parent/Guardian or Student. Any **two** of: Current Lease or Deed, Current Utility Bill, Current Property Tax Bill, Current Motor Vehicle Ownership and Insurance, Original Interim Property Tax Bill, Health Card Correspondence, Current Bank Statement, Original Credit Card Statement (personal information on document may be blocked out), Recent correspondence from a government agency, Most recent original Income Tax Assessment (personal information on document may be blocked out), Recent correspondence from a Municipal, Federal or Provincial Government Agency.
3. Most recent report card/transcript.
4. Credit Counselling Summary.
5. Attendance Profile.
6. V.P. Recommendation.
7. Health Card.
8. IEP/IPRC [if applicable].

VICE PRINCIPAL'S RECOMMENDATION

(To be completed by student's Vice Principal)

SCHOOL NAME: _____ TELEPHONE: _____

REASON FOR CHANGE OF SCHOOL: _____

Check the appropriate box:

- | | | | | |
|--------------------|-------------|--------------------------|--------------|--------------------------|
| 1. ACHIEVMENT | Acceptable | <input type="checkbox"/> | Unacceptable | <input type="checkbox"/> |
| 2. ATTENDANCE | Acceptable | <input type="checkbox"/> | Unacceptable | <input type="checkbox"/> |
| 3. BEHAVIOUR | Acceptable | <input type="checkbox"/> | Unacceptable | <input type="checkbox"/> |
| 4. PROGRAMME NEEDS | Special Ed. | <input type="checkbox"/> | ESL/ELD | <input type="checkbox"/> |

5. GENERAL COMMENTS: _____

NOTE:

- 1) The information you have provided is collected under the legal authority of Section 265(d) of the Education Act R.S.O. 1990, and may be used for administrative purposes related to school programs and records and for determining eligibility for attendance. Questions should be directed to the Principal.
- 2) Transferring schools could affect your eligibility to participate in sports.
- 3) Falsifying information on this form will result in your retirement from Central Technical School. Admission to Central Technical School is considered to be conditional pending receipt and review of the student's records from their previous school.

If this student is accepted to Jarvis Collegiate Institute would you "Release" the student from your Trillium database so that he/she may be registered at Jarvis Collegiate Institute? Yes No

It IS recommended / is NOT recommended that this student be considered for admission to Jarvis Collegiate Institute.

Date Please Print Vice-Principal's Name Vice-Principal's Signature

Direct Phone No: _____ Extension No: _____



STUDENT REGISTRATION FORM

Student Name: _____

School Name: _____
(School in which the student is registering)

Shaded Area for Office Use Only	Student OEN (Ontario Education Number): _____			
Trillium Student No.	Grade	Admit Date (yyyy/mm/dd)	Program	Homeroom

Admit Code

<input type="checkbox"/> Beginner(JK/SK)	<input type="checkbox"/> From Other School Board	<input type="checkbox"/> From Province Outside Ontario	<input type="checkbox"/> From this Board
<input type="checkbox"/> Beginner/DayCare	<input type="checkbox"/> From Outside Canada	<input type="checkbox"/> From Private School in Ontario	<input type="checkbox"/> Returning from Exchange
<input type="checkbox"/> From Native Ed. Auth. School	<input type="checkbox"/> From other country, born in Canada	<input type="checkbox"/> Returning after non-attendance	

Most recent Report Card Verified by: _____

(PLEASE PRINT)

STUDENT INFORMATION:

Name: _____
(Legal Last) *(Legal First)* *(Legal Middle)*

Name: _____
(Preferred Last) *(Preferred First)* *(Preferred Middle)*

Date of Birth ____/____/____ Male Female
y y y y m m d d

STUDENT CONTACT INFORMATION *(optional)*

Cell Phone ____ - ____ - ____ E-mail Address: _____

Note: Legal Name must be shown on legal document (i.e. birth certificate, passport, change of name order, adoption order, etc.) and will appear on all school Official Records

HOME ADDRESS:

<i>Proof of Residency Verification Document Shown</i> <i>Note: Principal may require such additional verification documentation as he/she deems necessary to confirm residency.</i>	1) _____ 2) _____
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Number _____ Street _____

Apt. No. _____ Unit No. _____ Suite No. _____

City/Town _____ Province _____ Postal Code _____

HOME PHONE NUMBER: ____ - ____ - ____ Listed: Yes No

Fill in the section below <u>ONLY</u> if country of birth is other than Canada	Verification Document: _____ Yellow ESL Verification Form Complete: Yes <input type="checkbox"/> No <input type="checkbox"/>
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Birth Country _____ Country of Last Residence _____

Status in Canada _____ First Arrival Date in Canada _____ Expiry Date _____

To be completed for ALL students:

Country of Citizenship: _____ Province of Birth: _____

*(If born in Canada)*Languages Spoken (*indicate all languages including English*)

1) _____

First Language Spoken at Home

2) _____

First Language Spoken at Home **EDUCATIONAL BACKGROUND****Has the student ever been registered at a school within the Toronto District School Board?** Yes No If **Yes**, provide the name of the school: _____ Last grade attended _____If **No**, provide the name of the school most recently attended: _____

School Address _____ School Phone: _____ - _____ - _____

_____ School Fax Number: _____ - _____ - _____

_____ School E-mail: _____

Name of the School Board: _____

Has the student previously received Special Education Support? Yes No

Type of program (if known): _____

Is the student **currently** under **suspension** from any school or board? Yes No Is the student **currently** under **expulsion** from any school or board? Yes No **FOR SECONDARY SCHOOL USE ONLY:**

<i>Proof of Literacy Test Result Received:</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<i>Transcript Attached:</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<i>First Entered ONT Sec. Schools after Grade 9:</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<i>Cohort Year:</i>	_____ (school year)	

Previous Community Service Hours completed outside Toronto District School Board: _____ hours

Grade 10 Literacy Test successfully completed (*Please provide proof of results*) Yes No **MEDICAL INFORMATION***Proof of Immunization Record Shown* Yes No Health Card No. _____ (Version No.) (*optional but recommended*)**Medical Conditions:**

If your child has medical needs or conditions of which the school should be aware, please describe the condition(s) below:

_____	Life Threatening
_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
_____	Yes <input type="checkbox"/> No <input type="checkbox"/>

SIBLING INFORMATION: (*if the student has brothers or sisters in this school, please indicate*)

Last Name

First Name

1) _____

2) _____

INDIGENOUS STUDENT SELF-IDENTIFICATION:All parents/guardians of Indigenous students, and students where they are 18 years of age or older, have the right to voluntarily self-identify. **Please check the most appropriate box to indicate Indigenous Identity (if applicable). Please select one box only.** First Nation Ancestry (Status or non-Status) Aboriginal person from outside Canada Metis Ancestry Inuit Ancestry Other

PARENTS OR LEGAL GUARDIAN INFORMATION ONLY

If Parents are separated or divorced they must provide the school with information about the custody/access arrangements with respect to their child, as per the Ontario Student Record Guidelines.

Documentation Received: Yes No Not Applicable

Contact priority should be based on whom to call in the case of an emergency and/or school closure

*Note: If e-mail address is provided, the school **may** use it for contact purposes.*

1) Last Name _____ First Name _____

(Please check all applicable boxes.) Male Female

Legal documents (custody order) are required in order for us to process a change to our records.

Relationship: Access to Child Guardian Lives with Student Access to Records
 Mother No Access Custody Receives Mail Speaks School Language
 Father

Foster Parent (Circle below, 1 = high, 4 = low)

Legal Guardian

For Emergency: Priority 1 2 3 4 For School Closure: Priority 1 2 3 4

Home No. _____ - _____ - _____ Listed: Yes No

Business No. _____ - _____ - _____ ext. _____ Cell No. _____ - _____ - _____

E-mail Address* _____

Consent for emails for a commercial nature** _____ (Initial) [if you do not consent, please leave blank]

Home Mailing Address (complete if different from student)

Number _____ Street _____

Apt. No. _____ Unit No. _____ Suite No. _____

City/Town _____ Province _____ Postal Code _____

2) Last Name _____ First Name _____

(Please check all applicable boxes.) Male Female

Legal documents (custody order) are required in order for us to process a change to our records.

Relationship: Access to Child Guardian Lives with Student Access to Records
 Mother No Access Custody Receives Mail Speaks School Language
 Father

Foster Parent (Circle below, 1 = high, 4 = low)

Legal Guardian

For Emergency: Priority 1 2 3 4 For School Closure: Priority 1 2 3 4

Home Phone _____ - _____ - _____ Listed: Yes No

Business No. _____ - _____ - _____ ext. _____ Cell No. _____ - _____ - _____

E-mail Address* _____

Consent for emails for a commercial nature** _____ (Initial) [if you do not consent, please leave blank]

Home Mailing Address (complete if different from student)

Number _____ Street _____

Apt. No. _____ Unit No. _____ Suite No. _____

City/Town _____ Province _____ Postal Code _____

EMERGENCY CONTACT INFORMATION

If a parent/guardian cannot be contacted use the following emergency contact:

1) Last Name _____ First Name _____

Male Female Relationship to student: _____

(Circle below, 1 = high, 4 = low)

For Emergency: Priority 1 2 3 4 For School Closure: Priority 1 2 3 4

Home Phone _____ - _____ - _____

Cell No. _____ - _____ - _____ Business No. _____ - _____ - _____ ext. _____

2) Last Name _____ First Name _____

Male Female Relationship to student/comment: _____

(Circle below, 1 = high, 4 = low)

For Emergency: Priority 1 2 3 4 For School Closure: Priority 1 2 3 4

Home Phone _____ - _____ - _____

Cell No. _____ - _____ - _____ Business No. _____ - _____ - _____ ext. _____

ADDITIONAL STUDENT INFORMATION: (if required for school)

For Funding Purposes

Fees Required if: (Approved by TDSB Admissions Office)

- Student is a non-resident pupil on a Study Permit.
- Student is a Visitor to Canada
- Fees are paid by the Government of Canada
- Fees are paid by a Native Education Authority

If uncertain, please consult or refer parent/guardian to the Toronto District School Board Admission Office, 5050 Yonge Street, Toronto, Ontario, M2N 5M8, or call (416) 395-8120.

All information provided above is correct and true. All admissions are conditional pending receipt of required documentation.

 Signature of Parent/Legal Guardian

Date: ____ / ____ / ____
 y y y y m m d d

Personal information on this form is collected under the authority of the *Education Act*, R.S.O. 1990, c.E.2 and the *Municipal Freedom of Information and Protection of Privacy Act*, R.S.O., 1990, c.M.56, and will be used by School Administration in the creation of the Emergency Calling Network and for school registration purposes. The Ontario Health Card number will be shared with local public health authorities. All personal information collected on this form will be stored on the Office Index Card. This information is updated annually. Questions about this collection should be directed to the F.O.I. Coordinator at the Toronto District School Board, 5050 Yonge Street, Toronto, Ontario, M2N 5M8, Tel. (416)397-3288.

*Email address will be used to provide information such as student progress and information nights and information from Board officials or the Board of Trustees that relate to the education of students or operation of schools.
 **Email address will also be used to provide information of a commercial nature. Canada's new Anti-Spam Legislation (CASL) took effect on July 1, 2014. CASL prohibits the sending of any type of electronic message that is commercial in nature unless the recipient has provided consent first. As a result, Toronto District School Board requires your consent to send you emails which contain advertising or promotions regarding school fundraisers, lunch programs, field trips, the sale of yearbooks, purchasing of student photos, books, prom or dance tickets, athletic events with an entry fee or similar events and offers.

JARVIS CI COURSE SELECTION 2018-2019

Year One		Year Two		Year Three		Year Four					
Subject	Code	Subject	Code	Subject	Code	Subject	Code				
ENGLISH											
<input type="radio"/>	English Pre-AP	ENG1D3	<input type="radio"/>	English Pre-AP	ENG2D3	<input type="radio"/>	English Pre-AP	ENG3U3	<input type="radio"/>	English AP	ENG4U0
<input type="radio"/>	English Academic	ENG1D1	<input type="radio"/>	English Academic	ENG2D1	<input type="radio"/>	English University	ENG3U1	<input type="radio"/>	English University	ENG4U1
<input type="radio"/>	English Applied	ENG1P1	<input type="radio"/>	English Applied	ENG2P1	<input type="radio"/>	English College	ENG3C1	<input type="radio"/>	English College	ENG4C1
						<input type="radio"/>	English Workplace	ENG3E1	<input type="radio"/>	The Writer's Craft	EWC4U1
									<input type="radio"/>	Ont. Literacy Course	OLC4O1
MATH AND COMPUTER SCIENCE											
<input type="radio"/>	Math Pre-AP	MPM1D3	<input type="radio"/>	Math Pre-AP	MPM2D3	<input type="radio"/>	Functions Pre-AP	MCR3U3	<input type="radio"/>	Sem. AP FUN/CAL	FUNCAL AP
<input type="radio"/>	Math Academic	MPM1D1	<input type="radio"/>	Math Academic	MPM2D1	<input type="radio"/>	Functions University	MCR3U1	<input type="radio"/>	Sem. FUN/CAL	FUNCAL
<input type="radio"/>	Math Applied	MFM1P1	<input type="radio"/>	Math Applied	MFM2P1	<input type="radio"/>	Functions & App. U/C	MCF3M1	<input type="radio"/>	Full Year Functions	MHF4UV
			<input type="radio"/>	Computer Studies	ICS2O1	<input type="radio"/>	Math College	MBF3C1	<input type="radio"/>	Data Management	MDM4U1
						<input type="radio"/>	Math Workplace	MEL3E1	<input type="radio"/>	Math Found. College	MAP4C1
						<input type="radio"/>	Computer Science	ICS3U1	<input type="radio"/>	Math Workplace	MEL4E1
									<input type="radio"/>	Computer Science	ICS4U1
SCIENCE											
<input type="radio"/>	Science Pre-AP	SNC1D3	<input type="radio"/>	Science Pre AP	SNC2D3	<input type="radio"/>	Chemistry Pre-AP	SCH3U3	<input type="radio"/>	Chemistry AP	SCH4U0
<input type="radio"/>	Science Academic	SNC1D1	<input type="radio"/>	Science Academic	SNC2D1	<input type="radio"/>	Chemistry University	SCH3U1	<input type="radio"/>	Chemistry Uni.	SCH4U1
<input type="radio"/>	Science Applied	SNC1P1	<input type="radio"/>	Science Applied	SNC2P1	<input type="radio"/>	Physics University	SPH3U1	<input type="radio"/>	Physics Uni.	SPH4U1
						<input type="radio"/>	Biology Pre-AP	SBI3U3	<input type="radio"/>	Biology AP	SBI4U0
						<input type="radio"/>	Biology University	SBI3U1	<input type="radio"/>	Biology Uni.	SBI4U1
						<input type="radio"/>	Biology College	SBI3C1	<input type="radio"/>	Earth & Space Science	SES4U1
						<input type="radio"/>	Environmental Science	SVN3M1			
GEOGRAPHY - CANADIAN AND WORLD STUDIES											
<input type="radio"/>	Geo. Academic	CGC1D1	<input type="radio"/>			<input type="radio"/>	Travel and Tourism	CGG3O1	<input type="radio"/>	World Issues	CGW4U1
<input type="radio"/>	Geo. Applied	CGC1P1									
CANADIAN AND WORLD STUDIES, SOCIAL SCIENCE, HUMANITIES											
			<input type="radio"/>	Can. History Academic	CHC2D1	<input type="radio"/>	American History	CHA3U1	<input type="radio"/>	Economics AP	CIA4U0
			<input type="radio"/>	Can. History Applied	CHC2P1	<input type="radio"/>	Ancient Civilizations	CHW3M1	<input type="radio"/>	Economic Issues	CIA4U1
			<input type="radio"/>	Civics (0.5 credit)	CIVCAR	<input type="radio"/>	Canadian Law	CLU3M1	<input type="radio"/>	Psychology AP	HSB4U0
			<input type="radio"/>	Careers (0.5 credit)	CIVCAR	<input type="radio"/>	Economics	CIE3M1	<input type="radio"/>	Families	HHS4U1
						<input type="radio"/>	Canadian Law - Workplace	CLU3E1	<input type="radio"/>	Philosophy	HZT4U1
						<input type="radio"/>	Leadership and Peer Support	GPP3O1	<input type="radio"/>	Equity/Diver. & Soc. Justice	HSE4M1
						<input type="radio"/>	Anth/Psych/Soc	HSP3U1	<input type="radio"/>	International Law	CLN4U1
						<input type="radio"/>	World Religions	HRT3M1	<input type="radio"/>	World History	CHY4U1
						<input type="radio"/>	World Religions in Daily Life	HRF3O1			
SPECIAL EDUCATION											
<input type="radio"/>	Learning Strategies	GLE1O9	<input type="radio"/>	Learning Strategies	GLE2O9	<input type="radio"/>	Learning Strategies	GLE3O9	<input type="radio"/>	Learning Strategies	GLE4O9
HEALTH AND PHYSICAL EDUCATION											
<input type="radio"/>	Phys. Ed Male	PPL1O M	<input type="radio"/>	Phys. Ed Male	PPL2O M	<input type="radio"/>	Active Living Male	PPL3O M	<input type="radio"/>	Active Living Male	PPL4O M
<input type="radio"/>	Phys. Ed Female	PPL1O F	<input type="radio"/>	Phys. Ed Female	PPL2O F	<input type="radio"/>	Active Living Female	PPL3O F	<input type="radio"/>	Active Living Female	PPL4O F
						<input type="radio"/>	Personal Fitness Male	PAF3O M	<input type="radio"/>	Intro. Kinesiology	PSK4U1
						<input type="radio"/>	Personal Fitness Female	PAF3O F	<input type="radio"/>	Personal Fitness Male	PAF4O M
									<input type="radio"/>	Personal Fitness Female	PAF4O F
MODERNS											
<input type="radio"/>	French Academic	FSF1D1	<input type="radio"/>	French Academic	FSF2D1	<input type="radio"/>	French	FSF3U1	<input type="radio"/>	French	FSF4U1
<input type="radio"/>	French Applied	FSF1P1									
<input type="radio"/>	French Beginner	FSF1O2									
ARTS											
<input type="radio"/>	VISUAL ARTS (Expressing Aboriginal Cultures)	NAC1O	<input type="radio"/>	Visual Art	AVI2O1	<input type="radio"/>	Visual Art	AVI3M1	<input type="radio"/>	Visual Art	AVI4M1
<input type="radio"/>	Drama	ADA1O1	<input type="radio"/>	Drama	ADA2O1	<input type="radio"/>	Visual Art Open	AVI3O1	<input type="radio"/>	Drama	ADA4M1
<input type="radio"/>	Music - Band	AMI1O1	<input type="radio"/>	Music - Band (Experienced)	AMI2O1	<input type="radio"/>	Orchestra	AMO3M1	<input type="radio"/>	Orchestra	AMO4M1
<input type="radio"/>	Music - Band Beg.	AMI1O2	<input type="radio"/>	Music - Strings (Experienced)	AMS2O1	<input type="radio"/>	Music - Vocal	AMV3M1	<input type="radio"/>	Music - Vocal	AMV4M1
<input type="radio"/>	Music - Strings	AMS1O1	<input type="radio"/>	Music - Vocal	AMV2O1	<input type="radio"/>	Music & Computers (Music Production)	AMM3O1	<input type="radio"/>	Guitar	AMG4M1
<input type="radio"/>	Music - Strings Beg.	AMS1O2	<input type="radio"/>	Guitar	AMG2O1	<input type="radio"/>	Drama Open	ADA3O1	<input type="radio"/>		
<input type="radio"/>	Music - Vocal	AMV1O1	<input type="radio"/>			<input type="radio"/>	Drama U/C	ADA3M1	<input type="radio"/>		
						<input type="radio"/>	Photography	AWQ3O1	<input type="radio"/>		
BUSINESS											
<input type="radio"/>	Intro Info. Tec.	BTT1O1	<input type="radio"/>	Business	BBI2O1	<input type="radio"/>	Accounting	BAF3M1	<input type="radio"/>	Financial Accounting	BAT4M1
						<input type="radio"/>	Marketing	BMI3C1	<input type="radio"/>	Business Leader.	BOH4M1
						<input type="radio"/>	Software App.	BTA3O1	<input type="radio"/>	Entrepreneurship (In the Electronic Age)	BDV4C1
									<input type="radio"/>	International Business	BBB4E1
ENGLISH AS A SECOND LANGUAGE											
<input type="radio"/>	ESL A	ESLAO8	<input type="radio"/>	ESL C	ESLCO8	<input type="radio"/>	ESL E	ESLEO8	<input type="radio"/>		
<input type="radio"/>	ESL B	ESLBO8	<input type="radio"/>	ESL D	ESLDO8						
CO-OPERATIVE EDUCATION											
						<input type="radio"/>	2 Credit Coop	COOP2	<input type="radio"/>	2 Credit Coop	COOP2
						<input type="radio"/>	4 Credit Coop	COOP4	<input type="radio"/>	4 Credit Coop	COOP4