



# Optional Attendance Form

Application for an Elementary Program at a School Outside the Resident Area  
1 Civic Centre Court, 1st Floor, Fax: 416-394-4970  
Attention: Coordinator - Guidance, Career & Adolescent Development

Date: \_\_\_\_\_

<b>Name of Requested School:</b> <input type="text"/>	Requested Start Date: _____
	For Grade : _____
<b>Home or Sending School:</b> <input type="text"/>	Does a sibling presently attend the requested school?    Yes / No
	If Yes: Name of Sibling _____

**Parents please note: Transportation is not provided for Optional Attendance Students**

### Applicant's Information:

Surname: \_\_\_\_\_ Given Names: \_\_\_\_\_ Birthdate: \_\_\_\_\_ (DD/MM/YY)

Student's Address: \_\_\_\_\_ Apt. # \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Present Grade/Class: \_\_\_\_\_ Student School I.D. Number: \_\_\_\_\_

Is the applicant under **Optional Attendance** at the present school? Yes / No

### Parent/Guardian Information:

Parent/Guardian's Name: \_\_\_\_\_ Business Phone Number: \_\_\_\_\_

### Child Care Information:

Will the child be attending Day Care?     Yes     No

Name of Day Care: \_\_\_\_\_ Telephone of Day Care: \_\_\_\_\_

Address of Day Care: \_\_\_\_\_

### Schools and Programs Applied for under Optional Attendance:

Specialized Programs/ Schools	Regular Programs/ Schools
1.	1.
2.	2.

Reasons for Applying/Other Considerations:

\_\_\_\_\_  
\_\_\_\_\_

Conditions on the reverse of this form have been read and agreed to:

Parent/Guardian **Signature:** \_\_\_\_\_

Current School Principal (or Designate) **Signature:** \_\_\_\_\_ Date: \_\_\_\_\_

**For Office Use Only:** Requested School's Decision:  Accepted     Not Accepted

Signature of Requested School Principal: \_\_\_\_\_ Date: \_\_\_\_\_

Distribution:	1 copy: To Parent/Guardian when decision is made 1 copy: To TDSB Home or Sending School
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**Please Note the Following:**

- 1) Priority of placement in the requested school will be based on a lottery if applications exceed the space available at the requested school.
- 2) If admitted, a student is expected to continue at the requested school until graduation.

**IMPORTANT DATES FOR SCHOOL ADMISSION BEGINNING SEPTEMBER 2018**

- (a) Applications must be received by **Friday, 16 February 2018**.
- (b) A lottery, if necessary, will be held **to determine the successful applicants**.
- (c) Parents/guardians will be informed of acceptance or non-acceptance **no later than March 9, 2018**.
- (d) Parents/guardians must inform the requested school of their acceptance of the offer by **Friday, 23 March 2018**.

**Note:** It is the parent/guardian's responsibility to deliver this application to the school or schools of choice.

Notice of Collection

In accordance with Section 29(2) of the Municipal Freedom of Information and Protection of Privacy Act 1989, this is to advise you that the information you have provided is collected under the legal authority of the Education Act, R.S.O. 1980, Chapter 314, as amended, its regulations and memoranda, and Sections 117, 118 and 119 of the Municipality of Metropolitan Toronto Act, R.S.O. 1980, Chapter 314, as amended, and may be used as necessary in the normal operation of the Board of Education and its constituent parts. Information would be released only under proper authorization.