



Program Registration 2019 - 2020

Student name (last, first): _____ Grade entering: _____ Birthdate: m____d____y____ Age: _____

Check the program option you are registering for:

√	Program options (based on core subjects only)	% (CBE / parent)
	teacher-led online course (3 courses) + parent-led (1 course)	75 / 25
	teacher-led @ Windsor Park (2 courses) + teacher-led online course (1 course) + parent-led (1 course)	75 / 25
	teacher-led @ Windsor Park (1 course) + teacher-led online course (2 courses) + parent-led (1 course)	75 / 25
	teacher-led @ Windsor Park (1 course) + teacher-led online course (1 course) + parent-led (2 courses)	50 / 50
	teacher-led online course (2 courses) + parent-led (2 courses)	50 / 50
	teacher-led @ Windsor Park (2 courses) + parent-led (2 courses)	50 / 50
	parent-directed program	0 / 100

List the course selection for each program option that applies (core subjects only):

- Parent-led - _____
- Windsor Park classes - Group A: Monday / Tuesday (Gr. 1-5 Math/Science; Gr. 6-9 Science/Social Studies)
 Group B: Wednesday / Thursday (Gr. 1-5 Math/Social Studies; Gr. 6-9 Math/ELA)
- Gr. 6-9 online classes - _____

For new registrations only, please check the following forms that have been submitted with this application:

<p>Within CBE: _____ Name of school</p> <ul style="list-style-type: none"> <input type="checkbox"/> transfer form <input type="checkbox"/> H.E. Notification form <input type="checkbox"/> registration questionnaire <input type="checkbox"/> copy of last report card <input type="checkbox"/> copy of last IPP, assessments, etc. (if applicable) 	<p>Outside CBE: _____ Name of school</p> <ul style="list-style-type: none"> <input type="checkbox"/> CBE Registration <input type="checkbox"/> birth certificate / passport <input type="checkbox"/> H.E. Notification form <input type="checkbox"/> registration questionnaire <input type="checkbox"/> copy of last report card <input type="checkbox"/> copy of last IPP, assessments, etc. (if applicable)
--	---

- Learning plans must be handed in with the Program Registration form and Notification form.
- If you would like to request a change to your child's program after submitting this form, please notify your facilitator to receive the Program Change Request form.

Parent Name (please print)

Parent Signature

Date (M/D/Y)

Email address

Home #

Cell #

Work #

For Office Use Only

Intake date _____

Facilitator: _____ Teacher(s): _____

(please circle) PD PD/WP PD/Online PD/WP/Online PD/Concurrent CBE portion _____ % Parent portion _____ %

Intake Supervisor

Date

Principal

Date

	Initials	Date
Added to PowerSchool		
Registration list updated		
Copy to facilitator		
Acceptance letter sent		
File requested		
Online form copied in blue for CBe-learn		