Dufferin-Peel Catholic District School Board
DUAL CREDIT
SUMMER 2017 Application Cover Sheet
COMPLETED APPLICATION CHECKLIST

☐ 1. Application Cover Sheet
☐ 2. DPCDSB Summer School Continuing Education Registration
☐ 3. DPCDSB Statement of Understanding
☐ 4. DPCDSB Media Consent Form
☐ 5. Copy of CREDIT COUNSELLING SUMMARY
☐ 6. College Application and Media Forms (Humber CULINARY or Sheridan SWAC or Sheridan CONSTRUCTION)

• PDF the application to yourself first (recommended)
• THEN forward the E-mail to: PATHWAYS REGISTRATION MAILBOX (pathways@dpcdsb.org)
• Anticipate a response within a couple of days indicating ‘receipt’ of the application

★ Please ensure all required information is filled out on both the application and this cover sheet. Incomplete applications will be sent back and may jeopardize the student’s chance of acceptance into a program. Please contact Irene Mota (Ext. #24516), Bruno Sacco (416-432-5180) or Administrative Support, Iruth Joseph (Ext. 24103) if you have any questions.

STUDENT INFORMATION
(Can be filled out by student – Please PRINT neatly in black/blue pen)

______________________________________________
Last Name

______________________________________________
First Name

______________________________________________
Student Cell Phone

______________________________________________
Student Home Phone

______________________________________________
Student E-mail (PLEASE PRINT CLEARLY)

Student Age AS OF DECEMBER 31, 2016

Gender M, F

----------------------------------------------
SCHOOL INFORMATION ----------------------------------
(To be filled out by CONTACT TEACHER – Please PRINT in black/blue pen)

______________________________________________
Name of Secondary School

______________________________________________
Name of School Guidance Head

______________________________________________
Main Contact Teacher(s) for this Student

______________________________________________
Name of COLLEGE and CAMPUS LOCATION

IEP  □ YES □ NO
IPRC □ YES □ NO

1. Is the applicant at-risk of not graduating in 4 years? (i.e. credit deficient) □ YES □ NO
2. Is the applicant unsure of his or her pathway beyond secondary school? □ YES □ NO
3. Is the applicant in need of career clarification? □ YES □ NO
4. Is the applicant returning to secondary school for the Dual Credit program after either having stopped attending for a semester or had previously dropped out? □ YES □ NO
5. Is this applicant a Specialist High Skills Major (SHSM) student? □ YES □ NO
6. Is this applicant registered as an OYAP Participant or has an RTA? □ YES □ NO

Any additional Information? – Please indicate here:
**Adult and Continuing Education**

**Registration Form - Secondary School Programs**

**Dual Credit**

**STUDENT ID#:**  
**STUDENT OEN#:**

**Legal Names:** (Students are registered by their legal name which will be used on legal documents. The student’s preferred name will be used at school)

Surname:  
First Name:  
Middle Name:  

Preferred Names: ☐ Same as Legal Names, or  
Surname:  
First Name:  
Middle Name:  

Address – Street:  
Postal Code:  
Unit #:  

City:  
Phone:  

Parent Email:  
Student Email:  

Does this student identify as:  
☐ Female  
☐ Male  

Birthdate:  
Year  
Month  
Day  

High School attending 2017/18:  
School Board:  

**Special Education:**

Does student have special education/diverse learning need?  
☐ Yes  
☐ No  

Does student have specialized equipment?  
☐ Yes  
☐ No  

SEA  
☐ Yes  
☐ No  

Has this student been identified as an exceptional student, through the Identification Placement Review Committee (IPRC)?  
☐ Yes  
☐ No  

**English Language Learners (ELL):** In your school/board, does this student receive ESL/ELD services?  
☐ Yes  
☐ No  

**Medical Condition(s)/Alert:**  
______________________________________________________________________________________________________________________  
______________________________________________________________________________________________________________________  

Anaphylactic Concerns: YES/NO  
If yes specify Allergy:  
Epinephrine Auto-Injector: YES/NO  

**DUAL CREDIT COURSE OFFERINGS**

<table>
<thead>
<tr>
<th>COURSE CODE</th>
<th>COURSE NAME</th>
<th>COURSE LOCATION</th>
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</table>

**SWAC - Dual Credit Program**

**Course Codes:** BOA4T and Credit Recovery in English/Humanities/Religion  
**Number of Potential Credits:** 2  
**Location:** Sheridan College – Hazel McCallion Campus, 4180 Duke of York Blvd., Mississauga  
**Dates:** Tuesday, July 4th – Monday, July 31st  
**Time:** 8:00 AM – 1:30 PM

**Basic Contemporary Culinary Skills – Dual Credit Program**

**Course Code:** TUI4T  
**Number of Potential Credits:** 1  
**Location:** Humber College – North Campus, 205 Humber College Blvd.  
**Dates:** Tuesday, July 4th – Monday, July 31st  
**Time:** 9:00 AM – 1:30 PM

**Introduction to Construction Trades – Dual Credit Program**

**Course Code:** TLS4T – should be TSL4T  
**Number of Potential Credits:** 1  
**Location:** Sheridan College – STC Campus, 407 Iroquois Shore Road, Oakville  
**Dates:** Tuesday, July 4th – Monday, July 31st  
**Time:** 9:00 AM – 1:30 PM

**Student and Parent Responsibility**

By signing this registration form, both student & parent/guardian understand and accept all of the terms and requirements for the Adult and Continuing Education Secondary Dual Credit Program:

1. Principal/Designate/Guidance Counsellor Signature  
   Date  
2. Student/Applicant Signature  
   Date  
3. Parent/Guardian Signature (for students under 18 years of age)  
   Date

White: Adult and Conted Office Copy  
Yellow – School Copy  
Pink – Student Copy (bring to first class)  
Revised: February 2017
Personal information collected shall be used for the provision of educational services and/or to administer health and emergency responses as required. If required to support the student’s needs, personal information, including OSR information may be requested from or shared with their current school. Information is collected under the authority of the Education Act, R.S.O. 1990, c. E.2, (s.170, s.190, s.264, s.265); Sabrina’s Law, 2005, S.O. 2005, c. 7 and Ryan’s Law (Ensuring Asthma Friendly Schools), 2015, S.O. 2015, C. 3 in accordance with the Municipal Freedom of Information and Protection of Privacy Act. Any questions regarding information collected, may be directed to the school principal or to the Records Management and Access & Privacy Administrator, 40 Matheson Blvd West, Mississauga, ON L5R 1C5 (905) 890-1221 ext. 24443

SUMMER SCHOOL DUAL CREDIT COURSE INFORMATION AND EXPECTATIONS:

Secondary School Students currently enrolled in a Day School: must submit registration forms to the Guidance Office at their home school.

- Register now as spaces are limited
- **Registration deadline is May 30, 2017 for early consideration**
- Students apply through your Guidance Office
- IEP – it is the student’s responsibility to provide their Summer School teacher with any IEP information
- Grade 8 students entering Grade 9 in September 2017 are not eligible to take courses
- For specific Dual Credit questions, please call 905-890-0708 ext. 24516
- Visit our website at [www.dpcdsb.org](http://www.dpcdsb.org)
  - Programs and Services
  - Summer Learning
  - Secondary Summer School

MANDATORY ATTENDANCE FOR ALL CREDIT PROGRAMS

Regular attendance is crucial for success in all credit programs. Attendance and punctuality are compulsory. Students must attend class on the first day of Summer School – Dual Credit Program or will be withdrawn from the course. Students may be withdrawn upon a single unacceptable absence or suspension. Students may be withdrawn following a third absence.

FINAL EXAM

Student must write an examination at the end of the program, on the date and time set out by the Adult and Continuing Education Department. Note the exam dates. **Students who miss the scheduled final exam will receive a mark of zero for the exam**

PUBLIC TRANSPORTATION

For information concerning public transportation, please call:

- Mississauga Transit  905-615-4636
- Brampton Transit  905-874-2999

CODE OF CONDUCT

The Dufferin-Peel Catholic District School Board, Adult and Continuing Education Department will strive to create a Catholic learning community in which students are able to develop their spiritual, intellectual, physical and social potential. Dufferin-Peel Catholic District School Board, mandated by the Ministry of Education Safe Schools policy, has established *The Catholic Code of Conduct*, which outlines the rights and responsibilities of students attending programs in Dufferin-Peel. Detailed information regarding the Catholic Code of Conduct is available at [http://www.dpcdsb.org](http://www.dpcdsb.org)

IS THERE A DRESS CODE?

Students are expected to dress in a respectful and appropriate manner.

CANCELLATION OF COURSES:

DPCDSB reserves the right to cancel or alter any program/course without notice, if required, due to enrolment, change of policy, or availability of instructors/facilities. **Dufferin-Peel does not mail out confirmations.**

Any further questions please contact our office at: 905-362-0701 Ext. 50016 or 905-891-9263
MEDIA CONSENT FORM

SCHOOL: ___________________________ SCHOOL YEAR: 2016-2017

To: Parent(s)/Guardian(s)/Student:

Schools cooperate with the media and other organizations, within reason, to promote the school board, schools, programs and student accomplishments. However, we recognize that there are instances where a parent/guardian may not wish their child photographed or recorded.

I hereby give the Dufferin-Peel Catholic District School Board and/or Sheridan/Humber College and its employees and agents:

(1) Permission to film/photograph/videotape or make an audio or digital recording of myself for purposes related to my Sheridan/Humber College Dual Credit course;

(2) The perpetual and non-exclusive right and license to use my image, my name and/or a quote from me about or a description of my involvement in a work education program in any of the media communications (i.e. print, audio, television, social media, online) promoting dual credit and experiential learning programs produced by or on behalf of the Dufferin-Peel Catholic District School Board and/or Sheridan/Humber College without payment to me;

(3) Consent under the Freedom of Information and Protection of Privacy Act to use and disclose my image, my name and/or a quote from me about or a description of my participation in any of the media communications (i.e. print, audio, television, social media, online) promoting experiential learning programs of the Dufferin-Peel Catholic District School Board and/or Sheridan/Humber College.

Please be advised that all or portions of the work referred to above will become part of the media organization's database and may be adapted for other educational or non-educational applications, productions, broadcast, re-broadcast, published, exhibited, reproduced, and/or distributed in various media formats to a number of markets.

To: The Dufferin-Peel Catholic District School Board

I HAVE READ AND UNDERSTAND THE INFORMATION PROVIDED ON THIS FORM. I VOLUNTARILY GIVE THE DUFFERIN-PEEL CATHOLIC DISTRICT SCHOOL BOARD CONSENT TO INCLUDE MY CHILD OR ME IN THE MEDIA COVERAGE AND ITS SUBSEQUENT USE DISCLOSURE AS DESCRIBED ABOVE.

I further understand that this consent is valid for the current school year and may be withdrawn by me at any time, upon written notice. This Consent form meets the requirements of the Municipal Freedom of Information and Protection of Privacy Act and the Education Act for the disclosure of personal information.

I CONSENT TO THE ABOVE: ☐ I DO NOT CONSENT TO THE ABOVE: ☐

Name of Student (Please Print) If over 16 years of age, Signature of Student Date

Name of Parent/Guardian (Please Print) Signature of Parent/Guardian Date

2015-16 Media Consent Form
Statement of Understanding
Dufferin-Peel CDSB Dual Credit Program

The Dual Credit Program offered at Sheridan/Humber College requires me to spend a considerable amount of time working and learning outside of my home school as a college/secondary school student. I will represent my school in a responsible manner and in accordance with my school's Code of Conduct Policy.

I understand that I must follow all the rules of the Dual Credit Program:

I will:

- attend regularly and be punctual at Sheridan/Humber College and (if applicable) at arranged bus pick-up locations;
- if absent from class, report my absence to my instructor/teacher, at the college and the Dual Credit, before the start of the day;
- complete all required assignments, tasks and tests;
- abide by the rules of Sheridan/Humber College including appropriate behaviour and respect for persons and property;
- be required (if applicable) to wear safety shoes and will be required to wear other prescribed clothing for this program (e.g. personal protective equipment) as directed by the instructor;
- carry my student ID with me and be prepared to present it to the bus driver and/or teachers/college instructors as requested;
- abide by the rules of the transportation company and act responsibly on the bus/taxi/public transportation or my privileges may be withdrawn;
- abide by Health and Safety regulations at Sheridan/Humber College;
- work co-operatively and communicate in a positive manner with all instructors/teachers and peers.

I understand that:

- Sheridan/Humber College instructors, coordinators, administrators and staff from Sheridan/Humber College, Dufferin Peel CDSB, and my secondary school may as required, mutually share student information as related to the Dual Credit Program (including student attendance and academic performance, code of conduct issues and student Dual Credit application information). Information shared may be disclosed to parents or guardians upon request;
- if I have an Individual Education Plan, I am responsible for accessing the college’s Student Accessible Services in order to understand and receive the support services provided by the college;
- if I do not use the busing or transportation provided, I will be responsible for arriving punctually at Sheridan/Humber College on the arranged class dates;
- supervision will not be provided on the bus. The bus company can refuse service for inappropriate behaviour;
- if I elect to travel as a passenger in a peer's personal or family vehicle, the district school board/college provide no insurance coverage;
- travel insurance is not provided while traveling to/from the college. Students are strongly encouraged to purchase Student Accident Insurance available online at a nominal cost at www.insuremykids.com
- I must declare to my home school and college any medical condition which may seriously affect my participation in the program. It is strongly recommended by the district school board/college that students obtain additional personal medical/accident insurance as deemed necessary;
- Dufferin Peel CDSB will not be held responsible for any liability or medical expenses arising out of participating in this program.

I understand that failure to comply with the above conditions/rules may result in my removal from the program and loss of academic credits.

________________________________________
Student Printed Name

________________________________________
Student Signature

________________________________________
Date

________________________________________
Parent/Guardian Printed Name (if student is under 18 yrs of age)

________________________________________
Parent/Guardian Signature (if student is under 18 yrs. of age)

________________________________________
Date

One copy of this signed statement is to be retained with the secondary school, one copy is to be retained by the college, one copy to be retained by the central board office and one copy is to be distributed to the student or, if the student is under 18 years of age, to the parent/guardian.
Summer SWAC 2017

Hazel McCallion CAMPUS

Student Information

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
<th>Date of Birth</th>
<th>Age</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td>mm dd yy</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Address

City

Postal Code

Phone #

Home

Cell

Email Address

Other Contact Information

Parent/Guardian Daytime Phone #

E-mail Address

Emergency Contact Relationship to Student

Emer. Phone # Day

Cell

School Information

Home School

OEN Number (Required) Dufferin-Peel Other

School Contact Name Phone # Ext.

IMPORTANT: Do you have a Sheridan ID? Yes if yes ID # No

Signature

Course Selection

One Course Package

<table>
<thead>
<tr>
<th>Start Date</th>
<th>Check</th>
<th>Secondary Course Code</th>
<th>College Course Code</th>
<th>Course Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>July 2017</td>
<td>✓</td>
<td>BOA4T</td>
<td>HUM 16693G</td>
<td>Human Relations: The Interpersonal Experience</td>
</tr>
</tbody>
</table>

Dates/Times: Tuesday, July 4, 2017 – Monday, July 31, 2017 (Inclusive) Times: 8:00 AM - 1:30 PM

Student Signature Date

Parent/Guardian Signature Date

(if student is under 18 years of age)
Student Photo Identification Information Collection Form

First Name ____________________________  

Last Name ______________________________

Sheridan Student ID# __________________________

Student Signature ____________________________

Date ____________________________  
(dd-mm-yyyy)

Parent/Guardian Signature ____________________________

Date ____________________________  
(dd-mm-yyyy)

Please note that your photograph and any other personal information identified on this form is collected pursuant to s.2 of the Ontario College of Applied Arts and Technology Act for purposes of administering the College’s security and emergency preparedness plans as well as to facilitate the provision of services offered by the College where identity verification is a reasonable requirement. Questions with respect to this collection may be addressed to the Director, Information Security and Compliance, Sheridan College, 1430 Trafalgar Road, Oakville, ON L6H 2L1, 905-845-9430 X2035.
Course Name: Human Relations – The Interpersonal Experience  
College Code: HUMN16693G  
Secondary School Code: BOA4T  
Passing Grade: 50%  
Credit Value: 1  
Start Date: Tuesday, July 4th – Monday, July 31st, 2017 (8:00 AM – 1:30 PM)

Course Descriptor:  
This course is designed to provide students with an introduction to principles and theories related to interpersonal communication. It takes an interdisciplinary approach that draws on principles of psychology, sociology, philosophy, and communications theory. This approach is based on the assumption that effective interpersonal communication is closely related to matters of personal growth and development. Topics include verbal and non-verbal communication processes, listening, perception, personality, motivation, leadership, defensiveness, conflict, stress, culture and gender.

**Transit tickets will be provided for students**