

Last name _____

Legal given name(s) _____

OEN _____

Select the online course requested. You may choose up to **ONE** per semester.

Semester 1			Semester 2		
Select	Course	Course Description	Select	Course	Course Description
	BBB 4MQ	International Business Fundamentals		ASM 3OQ	Media Arts
	BOH 4MQ	Business Leadership: Management Fundamentals		BBB 4MQ	International Business Fundamentals
	CGG 3OQ	Travel and Tourism		BOH 4MQ	Business Leadership: Management Fundamentals
	ENG 4UQ	English		CGW 4UQ	World Issues: A Geographic Analysis
	GWL 3OQ	Designing Your Future		ENG 4CQ	English
	HHS 4UQ	Families in Canada		ENG 4UQ	English
	HSB 4UQ	Challenge and Change in Society		GWL 3OQ	Designing Your Future
	HSP 3UQ	Introduction to Anthropology, Psychology, and Sociology		HHS 4UQ	Families in Canada
	ICS 3UQ	Introduction to Computer Science		HNB 4MQ	The Fashion Industry
	OLC 4OQ	The Ontario Secondary School Literacy Course		HSB 4UQ	Challenge and Change in Society
	PPZ 3CQ	Health for Life		ICS 4UQ	Computer Science
				MDM 4UQ	Mathematics of Data Management
				OLC 4OQ	The Ontario Secondary School Literacy Course
				PPZ 3CQ	Health for Life

Parent/ Guardian: Please read the material listed below with your son/daughter. Please indicate below that you have read all material before returning this form. All material is located on the Dufferin-Peel website <http://www.dpcdsb.org/CEC/> in the "Students" section. Click on "eLearning" – "Day School eLearning".

Student questionnaire Parent notification Orientation eLearning guidelines Desktop guidelines

Student signature: _____

Parent/Guardian name (students under 18) (please print): _____

Signature of Parent/Guardian (students under 18): _____

Guidance (please print): _____ (signature): _____

Student has been shared in Form

Student has been shared in Trillium

Please return this form to your guidance counsellor once you have completed all fields.