

Adult and Continuing Education Credit Registration Form



Once form is completed including signatures, please email to adultandcontedinfo@dpcdsb.org

Have you ever attended school in Ontario?		Select	If YES, which school?		Which School Board?		
Name of last school attended outside of Ontario:					School Board/Location		
Country:			City:		Grade:		
Student Number		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:			
Address:					Apt./Unit #		
City:		Postal Code:		Email:			
Home Phone:			Cell Phone:				
Do you identify as:			Birthdate:		YEAR	MONTH	DAY
Country of Citizenship:			Country of Birth:				
Arrival date in Canada:			Arrival Date in Ontario:				
Status in Canada			Expiry date (if applicable)				
Medical Condition(s)/Alert							
Indigenous Student (Voluntary Self-Identification): for the purposes of supporting First Nation, Metis and Inuit Student achievement objectives of Dufferin Peel and the Ministry of Education and of reporting student's achievement to the Ministry of Education and the Education Quality and Accountability Office, I/We choose to voluntarily self-identify my/child's ancestry as:						Select	
Emergency Contact:		Surname:		Relationship to Student:			
First Name:							
Cell Phone:			Alternate Phone Number:				
Courses are open to residents of Ontario only. Co-operative Education Placements are available for those living in Peel Region & the Greater Toronto Area. Select a maximum of 2 (two) individual credit courses OR 1 (one) Co-Operative Education Package per Module.							
1 st Course							
2 nd Course							
Attendance & Punctuality Regular attendance and punctuality are important factors for success. Students who are learning remotely are expected to have device cameras "turned-on" to enhance the overall Adult and Continuing Education learning experience.			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				
Course Fees - Individual credit course \$30.00, 2 individual credit courses (same Module) \$50.00, Accounting OR Office Admin Co-op Program - \$65.00, Internationally Trained Co-op Program \$75.00.							
Amount:	\$	Cash	Mastercard	Visa	Other		
Credit Card #				Expiry date	/	CVC #	
Name of card holder				Date:			
Signature of Card Holder				Date:			
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 <i>Education Act</i> , R.S.O. 1990, c. E.2, (s.170, s.190, s.264, s.265); <i>Sabrina's Law</i> , 2005, S.O. 2005, c. 7 and <i>Ryan's Law (Ensuring Asthma Friendly Schools)</i> , 2015, S.O. 2015, C. 3 in accordance with the <i>Municipal Freedom of Information and Protection of Privacy Act</i> . 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							
Adult Learner's Signature:						Date:	
For office use only: Staff please initial or sign as each step is completed							
Pre-Registered:	YES <input type="checkbox"/>	Initial	NO	Reason:	Initial		
Scheduled:	Course & Section:			Course & Section:			
Notes/Information:							
Signature:						Date Completed:	

