



**Dufferin-Peel
Catholic District
School Board**

Adult and Continuing Education Department Summer School

ST. GABRIEL OFFICE: 3750 Brandon Gate Drive
Mississauga, Ontario L4T3M8

Telephone: 905-362-0701 ext. 50016

Email: registerADCED@dpcdsb.org

SUMMER SCHOOL SWAC DUAL CREDIT 2019 REGISTRATION FORMS TRACKING DOCUMENT

Package#: _____

TO BE COMPLETED BY SENDING SCHOOL: (Please print)

SCHOOL NAME: _____

OF SUMMER SCHOOL SWAC DUAL CREDIT REGISTRATION FORMS IN THIS PACKAGE:

NAME OF CONTACT: _____ EXT: _____

(PERSON WHOM SENT THIS PACKAGE)

DATE PACKAGE SENT: _____

IMPORTANT: BUNDLE SECONDARY SUMMER SCHOOL SWAC DUAL CREDIT SEPERATELY FROM OTHER SECONDARY SUMMER SCHOOL FORMS

- You must submit this tracking form with your registration forms.
DO NOT FAX YOUR FORMS—EMAIL to: pathways@dpcdsb.org and registeradced@dpcdsb.org
- SUBJECT LINE FOR YOUR EMAIL** should be as follows:
SCHOOL NAME(change to your school name or five-character abbreviation) — *Summer SWAC DUAL CREDIT Applications - PACKAGE # 00*(change according to the number of this package).
- All registration forms sent by board courier must be received by our office by no later than May 30th, 2019
- May 30th, 2019 is the LAST DAY TO REGISTER FOR SUMMER SCHOOL SWAC DUAL CREDIT.
- Email is the preferred method to send applications however if you wish to send them in the courier kindly address your envelopes as follows:
Adult and Continuing Education — ST. GABRIEL OFFICE
3750 Brandon Gate Drive Mississauga, ON L4T 3M8
ATTN: SECONDARY SUMMER SCHOOL SWAC DUAL CREDIT OFFICE — L. Ribeiro
- We will email you a confirmation receipt indicating we have received your registration forms.

TO BE COMPLETED BY ADULT AND CONTINUING EDUCATION:

FROM: _____ (ADULT AND CONTINUING EDUCATION CONTACT)

OF SUMMER SCHOOL SWAC DUAL CREDIT Applications RECEIVED: _____

DATE RECEIVED: _____ (DATE RECEIVED IN OUR OFFICE)