

Greater Victoria School District #61
Continuing Education Registration Form 2018-2019

Pymt/method: _____
 Amount \$ _____
 Receipt# _____
 Date: _____

Canadian Citizenship Verified: <input type="radio"/> Canadian Birth Cert. <input type="radio"/> Canadian Passport <input type="radio"/> Perm Res Card <input type="radio"/> Status Card	BC Residency Verified: <input type="radio"/> BC Driver's License <input type="radio"/> Utility Bill/Mail <input type="radio"/> Rental Agreement <input type="radio"/> BC I.D.
Please bring in all I.D. requested above upon registration	

OFFICE USE ONLY <input type="radio"/> Non Grad (\$100) <input type="radio"/> School Age Grad (\$100) <input type="radio"/> Adult Grad (\$100-\$500) <input type="radio"/> International (\$750)	
<i>Adult Grad = born before July 1, 1999</i> <i>School age grad = born on/after July 1, 1999</i>	

Student Information (please read through all pages, and fill out all fields of the registration form)

Legal Last Name	Legal First Name and Middle Name	GENDER : FEMALE <input type="checkbox"/> MALE <input type="checkbox"/>
Legal Last Name (if different from Legal)	Usual First Name (if different from Legal)	BIRTHDATE: Day/Month /Year
Student Email:	Phone Number:	Current School:
Place of Birth: (City/ Province, Country)		INTERNATIONAL STUDENT YES <input type="checkbox"/> NO <input type="checkbox"/>
ABORIGINAL ANCESTRY: YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES: STATUS-BAND _____		
Current Address:		
Last High School Attended?	Name of School:	Location: City/Prov/Country
Have you Graduated?	Yes <input type="checkbox"/> Year of Graduation _____ No <input type="checkbox"/> Last Grade Completed? _____	Last Year Attended? _____

I hereby certify the above information is true to the best of my knowledge and authorize release of my school records to the Greater Victoria Continuing Education Program

Student Signature

Date

Emergency Contact / Medical Information

First Name:	Last Name:	First Name:	Last Name:
Phone Number:	Cell:	Phone Number:	Cell:
Medical Care Card #	Please specify any health conditions and/or medical required treatments		

Parent / Guardian / (ONLY IF STUDENT IS 18 YEARS AND YOUNGER)

First Name:	Last Name:	First Name:	Last Name:
Relationship to Student:		Relationship to Student:	
Phone Number:	Cell:	Phone Number:	Cell:

***The personal information collected on this form is required for the operation of the Continuing Education Program of School District No. 61. It is subject to the Freedom of Information and Protection of Privacy Act and will be kept secure and confidential according to the Act.

We will not accept any registration forms without the proper documentation and ID requested.

Course Selection

Name of Course	Semester

Fees

	Course Type	Fee
Non-Graduated Student	All	\$100 ((\$75 refundable deposit where required + \$25 registration fee))
School Age Graduate	All	
Adult Graduate	From tuition free course list below	
Non-resident (International)	All	\$750

Tuition-Free Courses

- Literacy Foundations Courses (1-7)
- Numeracy Foundations Courses (1-7)
- English 11, English 12
- Biology 11, Biology 12
- Chemistry 11, Chemistry 12
- Physics 11, 12
- Math 11, 12
- Calculus 12

Policies

- A 100% refund is provided up to seven calendar days prior to the start date of the course
- There are no refunds once the course has started
- It is the student's responsibility to fill out a refund request form, which may take up to 3 weeks to be processed
- Refunds will not be issued for receipts older than 24 months
- If you withdraw from a course, you will be ineligible to take that course tuition-free again for a year.

By signing below, I confirm that I have read and understood the policies

Signature _____ (parent if under 18) Date: _____

Expectations for Students using School or District Electronic Communications Systems

The following are expectations for students using electronic communications systems including but not limited to accessing the Internet and e-mail through the District's/Schools' networks.

Students in Grades 10-12, signing this document agree to the following terms and conditions.

School rules apply: As a student, I understand that there are school rules related to expected conduct, the use of appropriate language including making fair and respectful comments, and guidelines for responsible behaviour.

I understand that any other "School Rules" related to using technology must also be followed. More specifically, without limiting the above, I agree that:

- I understand that having access to use e-mail will be at the discretion of my school.
- I will use electronic communications systems for lawful educational purposes only
- I will handle with care and consideration any electronic communications equipment so as to avoid or minimize any physical damage or damage to data.
- I will use network services in such a way that performance is not disrupted or terminated.
- I will use my time and required materials so as not to be wasteful.
- I will use every effort so as not to corrupt the files or systems of other users.
- I will respect the privacy of other users.
- I will use language that is not considered offensive or threatening to others.
- I will avoid receiving, keeping or distributing inappropriate materials, including material that is obscene, pornographic, sexist, racist, belligerent or harmful to others.
- I will inform my teacher or principal if I come across any sites, material, information or situations that I believe contain inappropriate material.
- I will not meet with any strangers I talk to on the Internet without first consulting my parent or guardian.
- I will not distribute personal information about myself or anyone else through the District or school server including names, school, interests, extracurricular activities, home or school address or phone numbers. I may however, post school projects and work on the Internet as approved by my teacher.
- I will only use what I believe to be authorized, legal copies of information and software.
- If provided, I agree to keep any network service password secret and I agree that I will not use someone else's password to access the system.

Plagiarism Copyright:

- I agree that I will not copy any information and claim it as my own.
- I will ask the original author for written permission to use the graphics or any copyrighted works, including works of art, compositions, text, symbols, sayings, cartoons, excerpts, and quotations.
- I agree that I will give written credit for sources of information for my work.

Consequences of unacceptable use: The consequences for breaking any rules that apply to use of any electronic communications system, include but may not be limited to the following:

- Loss of privileges to access and use any electronic communications systems.
- Possible disciplinary action through the School Code of Conduct.

I understand that I am personally responsible for my actions, errors, and omissions in using a District electronic communications system and accessing the Internet. I further understand the consequences for failing to comply with the terms and conditions of these regulations, may well exceed school disciplinary action, and may include criminal investigations, civil suits or both.

Student Use Agreement – (Grades 10-12)

I have read, understand and will abide by the ***“Expectations for Students Using School or District Electronic Communication Systems”***. I will use resources responsibly, respect the rights of others and will not use these systems for unethical or illegal activities. I further understand that any violation of the district policy or regulation using electronic communications systems is unethical and may constitute a criminal offense. Should I commit any violations, my access privileges may be revoked, school disciplinary action may be taken, and possible legal action may be taken. I understand that this document will remain in my school file for as long as I am enrolled at this school or until terminated by either party by notification in writing.

Student's Name: _____ **Date:** _____

PLEASE PRINT

I have read the “Expectations for Students Using Electronic Communications Systems” and agree to abide by the provisions therein.

I have read ***“Expectations for Students Using School or District Electronic Communication Systems”*** and agree to those rules for being a responsible computer user.

Student Signature: _____

Parent/Guardian Permission Form – (Students in Grades 10-12)

I have read the attached ***“Expectations for Students Using School or District Electronic Communication Systems”***. I understand that our daughter or son may access District electronic communications systems which allow them to access resources, communicate with others and to publish their work. I further understand that, should our child's work be published, it will appear with copyright notice prohibiting use without written permission. I also understand that filtering or blocking software which may be applied to the electronic communications systems to prevent gaining access to inappropriate material is not foolproof and cannot guarantee 100% effectiveness.

	YES	NO
We grant permission for our daughter or son to access electronic communications systems		
We grant permission for our daughter or son to publish their work and/or photos online,		
We grant permission for our daughter or son to publish their work and/or photos online,		

** I understand that it is the responsibility of my child to avoid accessing the Internet or computers while at school as described above, until receipt of an Acceptable Use Agreement signed by both student/child and parent or guardian.*

Parent / Guardian's Name: _____ **Signature:** _____

PLEASE PRINT

Continuing Education Registration Form 2018-2019

To ensure your application is accepted and that you are officially registered, please complete the following seven steps:

1. Answered all fields in the registration YES
2. Provided all the necessary signatures YES
3. Attached a copy of your Canadian Citizenship. This can be a Canadian birth certificate, passport or permanent residency card. YES
4. Attached a proof of residency in British Columbia. This can be a scanned copy of your BC driver's license or a copy of a utility bill. YES
5. Paid a \$100.00 fee for the registration fee and resource deposit, if you are one of the following:
Yes N/A
 - Non-Graduated Student
 - School Aged Graduated Student
 - Graduated Adult
6. International Student
 - In District students (ISP)
 - ~Course Request Form Approved: -No fee.
 - ~Course Request Form Not Approved -\$750.00 per course
(Please provide your study permit upon registration).

Completed application package can be emailed to Continuing Education at ce@sd61.bc.ca

The method of payment:

Can be done in person with Cheque, Cash, Debit, and Credit. Mailed in, or over the phone using Visa or Master Card.

Incomplete packages will not be processed.