

ST. JOSEPH'S CATHOLIC HIGH SCHOOL 2017 - 2018

Grade 12 Course Selection Form

_____ M / F
 Legal Surname First Name Student Number

It is the responsibility of the student and their parent(s) or guardian(s) to select appropriate courses in consultation with the school where necessary, as per the Ministry of Education OSSD requirements. Please check course prerequisites carefully.

All students choose 8 courses and 1 alternate course.

For complete course listings please visit: www.careercruising.com/login/smc → select SJO under Student Course Guide

Compulsory Courses	COURSE SELECTIONS (Fill in your Compulsory courses)		
	Department	COURSE NAME Example: "Grade 12 English College"	COURSE CODE Example: "ENG 4C"
	1. English		
2. All grade 12 students will take Religious Education course: HRE4M or HZT4U (circle one)			

For Optional Courses below, please visit: www.careercruising.com/login/smc

Optional Courses	COURSE NAME	COURSE CODE	
	3.		
	4.		
	5.		
	6.		
	7.		
	8.		
	Alternate:		

Please Note:

St. Joseph's H.S. has a clear set of policies and procedures including a uniform policy, which is outlined in the Student Calendar. Your signature below indicates that your son/daughter agrees to abide by the policies and procedures of St. Joseph's High School.

Your signature below also indicates that you understand the selections made above and that **YOU CONSENT TO THE CHOICES.** If you wish further information including confirmation of your child's credit total, please contact the Guidance Office for clarification or arrange a visit with a guidance counsellor.

 Student Signature Parent/Guardian Signature Date

INFORMATION RELEASES: The Municipal Freedom of Information and Protection of Privacy Act requires written consent before personal information may be released by an institution. I give permission for the use of my child's name & photograph to be used in any media event. Collection of personal information is authorized under the Education Act. Information will be used for student timetabling, creation or updating of the student office index card and for monitoring separate school tax support. Questions regarding this collection should be directed to the Principal of St. Joseph's High School.

Parent/Guardian Signature _____ Date _____