



Summer School

July 4 - 29, 2016

Camrose Community Centre – 4516-54 Street, Camrose, AB

Non BRSD

Student

Registration

May 16 – June 29, 2016

Please print in all spaces unless otherwise instructed.

Student Information

Legal Last Name: _____ Given Name: _____

Student's preferred Name (if different from above): _____

Sex: _____ Grade: _____ Independent Student: _____ Student/Primary Contact No.: _____

Student/Secondary Contact No.: _____ Student email address: _____

Sending School: _____

Recommending administrator or designate: _____

Alberta Learning Number: _____ Date: _____

Parent Information

Parent First Name: _____ Parent Surname: _____

Parent Address: _____

City/Province: _____ Postal Code: _____

Parent Primary Contact No.: _____ Parent Secondary Contact No.: _____

Course Information *(to be completed by sending school)*

Senior High Course Selection: _____

Diploma Course: _____ If accommodation is required, please indicate type here _____

Junior High Course Selection: _____

This student needs to _____

(Please check the appropriate phrase below to complete the sentence above.)

_____ complete the course in its entirety.

_____ complete a partially finished course.

_____ write the final exam only.

_____ write the final exam and diploma.

_____ write the diploma only.

I, _____, as the administrator or designate of the sending school, confirm that this student has met the prerequisites for the course requested above. ***(Signature Required)***

**IMPORTANT: STUDENT MUST BRING THIS FORM SIGNED,
ALONG WITH PAYMENT TO THE 1ST DAY OF CLASS.**



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Course Payment Information

Fees: Senior High - \$100 per course - \$50 refund upon course completion and return of materials.
Junior High - \$150 per course or \$30 per module for partial course. **NO** refunds for junior high courses.

Payment is due with registration. Cheques should be made payable to **Battle River School Division**.

Payment: Cash _____ Cheque Number: _____

Senior High refund payable to:

Name: _____

Address: _____

City/Province: _____

Postal Code: _____

Refunds will be processed by September 15, 2016 upon successful completion of the course and return of all resources. Also note that marks will not be given to anyone until course materials are returned.

Signature: (Parent / Guardian / Student 18+)

Date

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Senior High Course Selection

ELA1104	English Language Arts 10-2	SCN1288	Science 14
ELA1105	English Language Arts 10-1	SCN2231	Biology20
ELA2104	English Language Arts 20-2	SCN2270	Science 20
ELA2105	English Language Arts 20-1	SCN2288	Science 24
ELA3104	English Language Arts 30-2	SCN2796	Chemistry 20
ELA3105	English Language Arts 30-1	SCN2797	Physics 20
SST1771	Social Studies 10-1	SCN3230	Biology 30
SST1772	Social Studies 10-2	SCN3270	Science 30
SST2771	Social Studies 20-1	SCN3796	Chemistry 30
SST2772	Social Studies 20-2	SCN3797	Physics 30
SST3771	Social Studies 30-1	SSN2171	Personal Psychology 20
SST3772	Social Studies 30-2	SSN2172	General Psychology 20
MAT1791	Math 10C	SSN3166	World Geography 30
MAT1793	Math 10-3	LCD3164	Abnormal Psychology 35
MAT2791	Math 20-1	PED0770	CALM 20
MAT2792	Math 20-2	LDC2754	Forensic Science 25
MAT2793	Math 20-3	LDC3754	Forensic Science 35 (5cr)
MAT3791	Math 30-1	HCS3000	Workplace Safety Systems
MAT3792	Math 30-2	HCS3010	Workplace Safety Practices
MAT3793	Math 30-3		
SCN1270	Science 10		

Junior High Course Selection

SCN07	Science 7	MAT07	Math 7
SCN08	Science 8	MAT08	Math 8
SCN09	Science 9	MAT09	Math 9
SST07	Social 7	ELA07	English 7
SST08	Social 8	ELA08	English 8
SST09	Social 9	ELA09	English 9

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