

WALNUT GROVE SECONDARY SCHOOL

COURSE SELECTION – GRADE 8 – FRENCH IMMERSION – 2017/18



Student last name: _____ First name: _____

Submit by date: _____ MyEdBC number: _____

Required Courses (circle one from each row)

English 8

Science Humaines 8

Français Langue 8
(James Kennedy & École des Voyageurs)

Français Langue 8
(Alex Hope)

Math 8

Sciences Naturelles 8

Éducation Physique 8

STSS (Student Support Services) – By Teacher referral

May replace one French or Elective Block. Please leave this section blank if resource is not required/recommended for this student.

Resource/Grade 7 teacher signature: _____ Ministry designation code: _____

Support services needed: _____

Elective Courses

(Circle six term courses **OR** three term courses and one full year course)

ADST or Arts Ed – 1 term each	Full Year Elective Courses	Outside the timetable Music (optional)
Computers 8	Art 8 (ADST and Art)	
Clothing & Textiles 8	Band 8 (Art)	Jazz Band 8
Drafting & Design 8	Computers 8 (ADST and Art)	Choir 8
Electronics & Robotics 8	Drama 8 (Art)	Drumline 8
Foods & Nutrition 8	<i>* Electives: Every effort is made to enroll students in the elective of their choice. However, some students will not be enrolled in a course they have selected due to timetable restrictions and class size limits.</i>	<i>*Honours Programs: Registration in honours and/or accelerated programs will be based on the results of challenge exams. Exam dates will be announced.</i>
Metalwork 8		
Engineering and Design 8		
Woodwork 8		
Art 8		
Drama 8 (Art Credit Only)		

Elective Choices listed in order of preference

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

Alt:
Alt:

Outside Timetable Course Selections

- 1.
- 2.

**Alt = Alternate or back up choices if the first choices are not possible*

Parent signature: _____

Student signature: _____

Counsellor signature: _____

For Counsellor Use Only: SP9-390, JA9-381

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CONTACT INFORMATION – GRADE 8 – FRENCH IMMERSION – 2017/18

Name: (legal – on birth certificate)

Last: _____
 First: _____
 Middle: _____
 Birthdate: (DD/MM/YYYY) _____
 Age: _____

Course selection guide
 available at
<http://wgsscounselling.weebly.com>

Name: (other – if different than on birth certificate)

Last: _____
 First: _____
 Middle: _____

Parent Contact Information:	Emergency Contact Information:
Name: _____	Name: _____
Address: _____	Address: _____
Cell phone: _____	Cell phone: _____
Home phone: _____	Home phone: _____
Work phone: _____	Work phone: _____
Email address: _____	Email address: _____

Student Contact Information:
Primary address: _____ Postal Code: _____
Cell phone number: _____
Home phone: _____
Email address: _____

Student History:
Birthplace: City _____ Province _____ Country _____
Previous school: _____ Province _____
Legal alert: <input type="checkbox"/> Yes <input type="checkbox"/> No Custody: <input type="checkbox"/> Sole Custody <input type="checkbox"/> Joint Custody
Aboriginal ancestry (if YES, check one) <input type="checkbox"/> First Nations <input type="checkbox"/> Metis <input type="checkbox"/> Inuit
Citizenship: <input type="checkbox"/> Canadian Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> International Student <input type="checkbox"/> ELL Support Needed
Medical condition: No ___ Yes* ___ <i>*Submit medical form with registration</i>
Care Card number: _____
Received learning assistance - list grade(s) _____