

# Welcome to SJSH Registration!

## REGISTRATION PACKAGE CHECKLIST:

*NOTE: Please ensure that the below items are included when submitting your registration package. All registrations will be confirmed once completed.*

- REGISTRATION FORM** (Complete with signatures, contact details, course selections...)
- BIRTH CERTIFICATE** (Copy is sufficient)
- PROOF OF RESIDENCY** (Utility bill with address)
- OLD REPORT CARD** (OEN should be visible)
- CREDIT SUMMARY** (May be attained by previous high school)
- INDIVIDUAL EDUCATION PLAN** (Copy is sufficient, if student has an IEP)
- TRANSPORTATION FORM** (Complete with signatures, contact details, OEN...)
- APPLICATION FOR DIRECTION OF SCHOOL SUPPORT** (Optional)
- GUIDELINES FOR STUDENT RESPONSIBLE USE OF TECHNOLOGY** (Complete with signatures, dates...)

*NOTE: In-person registration sessions may be scheduled with an SJSH Guidance Counsellor. To schedule, please call:*

**Mr. Travers @ 705-494-8600 ext. 40233 (Last Names Starting with A – H)**

**Mr. Celebre @ 705-494-8600 ext. 40413 (Last Names Starting with L – Z)**

**GRADE 10, 11 & 12 REGISTRATION FORM 2024-2025**

The personal information you provide on this form is collected by the Nipissing-Parry Sound Catholic District School Board under the authority of the Education Act (R.S.O. 1990 c.E.2) ss.58.5, 265 use and 266 as amended. The information will be used for School and Board operations including but not limited to student registration, staff and resource allocation and to provide information to employees where necessary to support them in carrying out their job duties. In addition, the information may be used to deal with matters of health and safety or discipline and may be required to be disclosed in compelling circumstances, for law enforcement matters or in accordance with any other Act. The information will be used in accordance with the Education Act, the regulations, and guidelines issued by the Minister of Education governing the establishment, maintenance, use, retention, transfer and disposal of pupil records. For questions about this collection, please contact your school Principal.

**NOTE: ALL REGISTRANTS MUST COMPLETE THE INFORMATION CONTAINED IN THE BOXES BELOW.**

Registering for Grade \_\_\_\_\_

<p><b>Legal Name:</b> _____                  Last Name                      First Name                      Middle Name</p> <p>First name normally used: _____</p> <p>Date of Birth: _____ Age as of Dec. 31/2024: _____                  (Month / Day / Year)</p> <p>Province of birth: _____ Country of birth: _____</p> <p>Original birth certificate verified by: _____</p>	<p><b>Indicate to which group you belong:</b></p> <p>1. <input type="radio"/> A school board in Ontario                  2. <input type="radio"/> An exchange student                  3. <input type="radio"/> A non-resident Native student (i.e. not living on a Reserve)                  4. <input type="radio"/> A Native Student with Band Name: _____                  5. <input type="radio"/> A school board from another Canadian province                  6. <input type="radio"/> A foreign student</p> <p><b>Students in groups 4, 5, and 6 must make financial arrangements with the Board</b></p>
<p>I give permission for my child's picture, first name and surname initial to appear on the school website and in other media releases of a school promotional and informational nature.</p> <p>Parent/Guardian Signature _____ Student Signature (18 Or Over) _____ Date _____</p>	<p>I give permission for my child to participate in any daily, local, school excursions or functions providing I am informed in advance.</p> <p>Parent/Guardian Signature _____ Student Signature (18 Or Over) _____ Date _____</p>

<p><b>PERSONAL INFORMATION</b>                  Original source document (i.e. utility bill) must accompany registration if student is new to the NPSCDSB</p> <p>Mailing Address: _____ Apt. # _____                  City: _____ Postal Code: _____                  Telephone: _____ Religion: _____                  Parish: _____                  Family Doctor: _____ Telephone: _____                  Emergency Contact (other than parent or guardian): _____ Telephone: _____                  School Attended in 2023-2024 _____                  _____ If not in Nipissing-Parry</p> <p>Sound Catholic District, full name &amp; address:                  Have you ever attended St. Joseph-Scollard Hall? Yes <input type="radio"/> No <input type="radio"/></p> <p>Will you use Bus Transportation (3 or more km required)? Yes <input type="radio"/> No <input type="radio"/></p> <p>Was English the first language the student learned at home? Yes <input type="radio"/> No <input type="radio"/></p> <p>Have you passed the Ontario Grade 10 Literacy Test? Yes <input type="radio"/> No <input type="radio"/></p> <p>Documentation of Literacy Test results provided to S.J.S.H. Yes <input type="radio"/> No <input type="radio"/> Type: _____</p> <p><b>The Report Card should be addressed to:</b>                  Parents <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian <input type="checkbox"/> Student (18 or over) <input type="checkbox"/></p>	<p><b>STATEMENT OF ACCESS:</b> Every student and a parent or guardian of a student, who is not an adult, has right of access to the student's Ontario Student Record folder.</p> <p><b>Father/Guardian</b> (First &amp; Last Name): _____                  Home Address and Telephone: Same as Mine <input type="checkbox"/>                  Different: _____                  Street Number &amp; Street Name _____ Apt. # _____                  City _____ Postal Code _____                  Home Telephone: _____ Work Telephone: _____</p> <p><b>Mother/Guardian</b> _____                  Last Name                      First Name                  Home Address and Telephone: Same as Mine <input type="checkbox"/>                  Different: _____                  Street Number &amp; Street Name _____ Apt. # _____                  City _____ Postal Code _____                  Home Telephone: _____ Work Telephone: _____</p> <p>If student is not living at home while attending school, student is boarding with:                  Name: _____                  Address: _____ Postal Code: _____                  Home Telephone: _____ Work Telephone: _____                  Relationship to student: _____</p>
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All new registrants to S.J.S.H., from outside the Nipissing-Parry Sound District, must present their immunization records to the North Bay & District Health Unit for assessment before registration will be considered.

Name of Student: \_\_\_\_\_

St. Joseph-Scollard Hall Course Selections 2024-2025

2024/2025 Grade Level: \_\_\_\_\_

Courses Grade 10	Courses Grade 11	Courses Grade 12	Courses Alternate Courses	General Information
<input type="checkbox"/> ADA2OC <input type="checkbox"/> ADD2OC <input type="checkbox"/> AMG2OC <input type="checkbox"/> AMM2OC <input type="checkbox"/> AMT2OC <input type="checkbox"/> AMU2OC <input type="checkbox"/> AMV2OC <input type="checkbox"/> ATC2OC <input type="checkbox"/> AVI2OC <input type="checkbox"/> BEP2OC <input type="checkbox"/> CHC2DC <input type="checkbox"/> CHC2DF <input type="checkbox"/> CHV2PC <input type="checkbox"/> CHV2OC <input type="checkbox"/> CHV2OF <input type="checkbox"/> ENG2DC <input type="checkbox"/> ENG2LC <input type="checkbox"/> ENG2PC <input type="checkbox"/> FIF2DC <input type="checkbox"/> FSF2DC <input type="checkbox"/> FSF2PC <input type="checkbox"/> GLC2OC <input type="checkbox"/> GLC2OF <input type="checkbox"/> HRE2OF <input type="checkbox"/> HRE2OR <input type="checkbox"/> LNOBOC <input type="checkbox"/> MAT2LC <input type="checkbox"/> MFM2PC <input type="checkbox"/> MPM2DC <input type="checkbox"/> NAC2O2 <input type="checkbox"/> PPL2OX <input type="checkbox"/> PPL2OY <input type="checkbox"/> SNC2DC <input type="checkbox"/> SNC2LC <input type="checkbox"/> SNC2PC <input type="checkbox"/> TCJ2OC <input type="checkbox"/> TDJ2OC <input type="checkbox"/> TEJ2OC <input type="checkbox"/> TFJ2OC <input type="checkbox"/> TGJ2OC <input type="checkbox"/> TXJ2OC	<input type="checkbox"/> ADA3MC <input type="checkbox"/> ADD3MC <input type="checkbox"/> AMU3MC <input type="checkbox"/> AMG3MC <input type="checkbox"/> AMM3MC <input type="checkbox"/> AMT3MC <input type="checkbox"/> AMV3OC <input type="checkbox"/> ASM3MC <input type="checkbox"/> ATC3MC <input type="checkbox"/> AVI3MC <input type="checkbox"/> AVI3OC <input type="checkbox"/> AWQ3MC <input type="checkbox"/> AWR3MC <input type="checkbox"/> BAF3MC <input type="checkbox"/> BDI3CC <input type="checkbox"/> BM3CC <input type="checkbox"/> BMX3EC <input type="checkbox"/> CGF3MC <input type="checkbox"/> CHW3MC <input type="checkbox"/> CLU3MC <input type="checkbox"/> ENG3CC <input type="checkbox"/> ENG3EC <input type="checkbox"/> ENG3UA (AP) <input type="checkbox"/> ENG3UC <input type="checkbox"/> FIF3UA (AP) <input type="checkbox"/> FIF3UC <input type="checkbox"/> FSF3UC <input type="checkbox"/> GLW3OV (e) <input type="checkbox"/> HNC3CC <input type="checkbox"/> HRF3OR <input type="checkbox"/> HRT3MF <input type="checkbox"/> HRT3MR <input type="checkbox"/> HSP3UV (e) <input type="checkbox"/> ICS3CC <input type="checkbox"/> ICS3UC <input type="checkbox"/> LNOCO <input type="checkbox"/> LNOCO <input type="checkbox"/> MBF3CC <input type="checkbox"/> MCF3MC <input type="checkbox"/> MCR3UC <input type="checkbox"/> MEL3EC <input type="checkbox"/> NBE3UC <input type="checkbox"/> NBE3CC <input type="checkbox"/> NBV3CC <input type="checkbox"/> NBV3EC <input type="checkbox"/> NDA3UC <input type="checkbox"/> PPL3OX <input type="checkbox"/> PPL3OY <input type="checkbox"/> SBI3CC <input type="checkbox"/> SBI3UA (AP) <input type="checkbox"/> SBI3UC <input type="checkbox"/> SCH3UC <input type="checkbox"/> SPH3UC <input type="checkbox"/> TCJ3CC <input type="checkbox"/> TDJ3MC <input type="checkbox"/> TFJ3CD <input type="checkbox"/> TWJ3EC <input type="checkbox"/> TXJ3EC <input type="checkbox"/> DOC3OC	<input type="checkbox"/> ADA4MC <input type="checkbox"/> ADD4MC <input type="checkbox"/> AMU4MC <input type="checkbox"/> AMG4MC <input type="checkbox"/> AMM4MC <input type="checkbox"/> AMT4MC <input type="checkbox"/> ASM4MC <input type="checkbox"/> ATC4MC <input type="checkbox"/> AVI4MC <input type="checkbox"/> AWQ4MC <input type="checkbox"/> AWR4MC <input type="checkbox"/> BAT4MV (e) <input type="checkbox"/> BOH4MC <input type="checkbox"/> CHY4UA (AP) <input type="checkbox"/> CHY4UC <input type="checkbox"/> CHY4CC <input type="checkbox"/> CLN4UV (e) <input type="checkbox"/> CGR4MC <input type="checkbox"/> CGW4UC <input type="checkbox"/> ENG4UC <input type="checkbox"/> ENG4CC <input type="checkbox"/> ENG4EC <input type="checkbox"/> EWC4UC <input type="checkbox"/> FEF4UC <input type="checkbox"/> FIF4UC <input type="checkbox"/> FSF4UC <input type="checkbox"/> HSE4MC <input type="checkbox"/> HRE4MR <input type="checkbox"/> HRE4MF <input type="checkbox"/> HRE4OR <input type="checkbox"/> HZT4UV <input type="checkbox"/> ICS4CV (e) <input type="checkbox"/> ICS4UV (e) <input type="checkbox"/> LNODOC <input type="checkbox"/> MAP4CC <input type="checkbox"/> MCT4CC <input type="checkbox"/> MCV4UC <input type="checkbox"/> MDM4UC <input type="checkbox"/> MEL4EC <input type="checkbox"/> MHF4UC <input type="checkbox"/> NDG4MC <input type="checkbox"/> NDW4MC <input type="checkbox"/> OLC4OC <input type="checkbox"/> PLF4MC <input type="checkbox"/> PPL4OC <input type="checkbox"/> PSK4UC <input type="checkbox"/> SBI4UA (AP) <input type="checkbox"/> SBI4UC <input type="checkbox"/> SCH4CC <input type="checkbox"/> SCH4UC <input type="checkbox"/> SNC4MC <input type="checkbox"/> SPH4CC <input type="checkbox"/> SPH4UC <input type="checkbox"/> TFJ4EC <input type="checkbox"/> TCJ4CC <input type="checkbox"/> TDJ4MC <input type="checkbox"/> TXJ4EC <input type="checkbox"/> DOC4OC	<p><u>Alternate Courses</u></p> <p>In the event that some of my selections cannot be timetabled, my alternate choices <u>will be used</u></p> <hr/> <hr/> <hr/>	<p>Specialist High Skills Candidate <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><input type="checkbox"/> Business <input type="checkbox"/> Hospitality and Tourism <input type="checkbox"/> Arts and Culture</p> <p><u>EXCEPTIONAL STUDENTS</u></p> <p>If you have been identified as exceptional, check the box. <input type="checkbox"/></p> <p>Please list the identification: _____</p> <p>If you have been identified as exceptional, at a school other than SJSJH, you must attach, to this form, your most recent report card, I.E.P. (Individual Educational Plan), and I.P.R.C. (Identification, Placement &amp; Review Committee) form to register. The exceptional student's registration will not be processed without this documentation. This confidential information will be used only for the improvement of the student's placement and program.</p> <hr/> <p><u>HEALTH CONCERNS</u></p> <p>Please indicate any <u>serious allergies</u> or health concerns:</p> <p>Does your child carry an epi-pen? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <hr/> <p>Are you currently under expulsion at another school? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <hr/> <p><u>ABORIGINAL ANCESTRY</u> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Please circle one: First Nations <input type="radio"/> Métis <input type="radio"/> Inuit <input type="radio"/></p> <p>(reporting this information is voluntary/confidential and will be used for enhancing Aboriginal education programs/resources to increase student success)</p> <hr/> <p>S.J.S.H. has the ability to provide information via email. Would you like to make use of this service? <input type="radio"/> No <input type="radio"/> Yes</p> <p>Email address: _____</p> <p>As a Parent/Guardian/Adult Student, I agree with these course selections and consider them to be final. The school has my permission to send the Ontario Student Record (OSR) and/or Ontario Student Transcript (OST) to another school in the event that the learning institution is changed. Also, upon my request, the OST should be sent to locations designated by me.</p> <p>Student Signature: _____</p> <p>Parent/Guardian Signature: _____</p> <p>Counselor Signature: _____</p> <p>Date: _____</p> <p>Original source document verified by (S.J.S.H. Staff): _____</p> <hr/>





# TRANSPORTATION FORM

EL-001  
Rev. DEC 2019

OEN: \_\_\_\_\_

**New Student** — previous school: \_\_\_\_\_

**Changing and/or Updating a Student's Record**

*Joint Custody: Use Form #: EL-004-1 Transportation Request for Joint Custody*

**Demitted Student / Date:** \_\_\_\_\_

**REQUESTED EFFECTIVE DATE:** \_\_\_\_\_, 20\_\_\_\_

3 full business days are required to arrange transportation and advise all parties involved, **except during the school start-up period. Changes received after July 31 may take up to 3 weeks to process.** Transportation is the parent's responsibility until transportation arrangements have been confirmed.

<b>STUDENT'S NAME:</b>		
<b>SCHOOL:</b>	<b>GRADE:</b>	<input type="checkbox"/> French Imm. <input type="checkbox"/> Extended French Imm. <input type="checkbox"/> Program:
<b>HOME ADDRESS:</b> <small>(complete with city/municipality)</small>		<b>POSTAL CODE:</b>
<b>PARENTS/GUARDIAN NAME:</b>	<b><u>TRANSPORTATION NOT REQUIRED:</u></b>	
<b>PRIMARY TELEPHONE NUMBER:</b>	<input type="checkbox"/> School Daycare <input type="checkbox"/> AM <input type="checkbox"/> PM	
<b>ADDITIONAL TELEPHONE NUMBER(S):</b>	<input type="checkbox"/> Parents Driving	
	<input type="checkbox"/> Walking	

**TRANSPORTATION REQUIRED:**

<b><u>AM Pick-up Address:</u></b> <input type="checkbox"/> Home <input type="checkbox"/> Sitter/Daycare	<b><u>PM Drop-off Address:</u></b> <input type="checkbox"/> Home <input type="checkbox"/> Sitter/Daycare
<b><u>Name of Sitter/Telephone Number:</u></b>	<b><u>Name of Sitter/Telephone Number:</u></b>

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian

<b>SCHOOL USE ONLY</b>	<input type="checkbox"/> UPDATED TRILLIUM / ASPEN	<input type="checkbox"/> FAXED TO NPSSTS 705-472-3170
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## **Guidelines for Student Responsible Use of Technology**

*It is the policy of the Nipissing-Parry Sound Catholic District School Board to endorse the use of existing and emerging technologies to promote educational excellence and that the Internet and the Board's Information Technology are used to support learning in a manner that is consistent with the Board mission and vision statement, Catholic values and strategic directions.*

### **1. Purpose of the Network (LAN/WAN)**

- Use of the information technologies owned or operated by the Board must be used for the purpose of enhancing education and instruction and to conduct Board business.
- Use of the Board's Wide Area Network and its connection to the Internet for advertisement or monetary profit must have Board approval.
- The Board will from time to time and without prior notice to the student, access and/or monitor the Board's Electronic Information Systems.

### **2. Digital Citizenship**

- The Board provides access to the Internet for educational activities defined in the teacher instructional plans.
- Users will not post, publish, or display any defamatory, abusive, threatening, sexist, racially offensive, profane, obscene, discrimination based on sexual orientation, illegal and other material found to be offensive.
- The sending or storage of offensive messages from any source is prohibited.
- Users shall not copy information or software in violation of copyright laws.
- Software and resources downloaded will be used only under the terms and conditions specified by the owner or creator of those resources.
- Only authorized staff are to download software, applications ("apps") or executable (.exe) programs.
- It is prohibited for a user to post messages and attribute them to another user.
- Users will not plagiarize works that they find on the Internet. Plagiarism is taking the ideas or writings of others and presenting them as if they were original to the user.

### **3. Vandalism**

- Transmission of any software having the purpose of damaging computer systems and files (i.e. computer viruses) is prohibited.
- Any malicious attempt to harm or destroy the data of any person, computer or network linked to the Board's Network is prohibited and will result in financial compensation to the Board and/or the pursuance of criminal charges and/or other disciplinary action consistent with the School Code of Conduct, Board policy and/or legal authorities.
- Users will not attempt to gain unauthorized access to the Board's system or to any other computer system through the Board's system, or go beyond their authorized access. This includes attempting to log in through another person's account or accessing another person's files. These actions are illegal, even if only for the purposes of browsing.

#### **4. Security and Personal Safety**

- Users may not share their passwords or accounts with others and must make all efforts to safeguard this information from unauthorized users.
- Users are advised to refrain from giving out personal information, such as their family name, email address, home address, school name, city, country or other information that could help someone locate or contact them in person.
- Users will not post identifying photos, videos, or recordings. Any capture of photo, video or audio recording through the use of any device or sharing/posting of such will only be done with the expressed authorized permission of those involved.
- The Board reserves the right to block access to sites and to conduct regular checks of the system as deemed appropriate.
- An individual search will be conducted if there is reasonable cause to suspect that a user has violated the law, the school code of conduct, and/or the Student Responsible Use of Technology Agreement.
- Personal files are discoverable under public records law.
- Users must screen lock their computers when left unattended.

#### **5. Inappropriate Material**

- Unauthorized interactive gaming will not be accessed through the Board Network.
- Upon access to or receipt of material that is educationally inappropriate and contrary to the Board's Mission Statement, the user shall immediately turn off the display and report the incident to the classroom teacher, staff, and/or immediate supervisor.

#### **6. Violations**

The principal of the school will deal with violations of the Student Responsible Use of Technology Agreement. Students found in violation of the agreement may face disciplinary action, which may include:

- Suspension from the Board network.
- Revoking access to electronic devices and the Internet on the Board network.
- Suspension from school.
- Paying the cost of any damages/losses resulting from the student's inappropriate use of the resources.
- Referral to the police.





**Information Collection Authorization:**

The information contained on this form has been collected under the authority of the Education Act R.S.O. 1980, as amended and the Municipal Freedom of Information and Protection of Privacy Act, 1989. Information from this form will be used to enforce appropriate use of the Internet and information technology in accordance with **Usage of The Board's Computer Network and Internet (AG 34.0)** and guidelines attached. The contact person for queries regarding this information is the Supervisor of Information Technology Department or the Superintendent of Education.

**Intermediate/Senior (Grades 9 to 12)**

It is the policy of the Nipissing-Parry Sound Catholic District School Board to endorse the use of existing and emerging technologies to promote educational excellence and that the Internet and the Board's Information Technology are used to support learning in a manner that is consistent with the Board mission and vision statement, Catholic values and strategic directions.

**STUDENT CONSENT**

- I have read and understand the Nipissing – Parry Sound Catholic District School Board's Student Responsible Use of Technology Agreement /Guidelines.
- I agree to abide by the terms and conditions described within this Agreement and the requirements outlined in the attached guidelines and in the following Board policy: **Usage of The Board's Computer Network and Internet (AG 34.0)** which can be found at [www.npsc.ca](http://www.npsc.ca).
- I recognize that failure to comply with this Agreement may result in the loss of computer and/or network access privileges, financial compensation to the Board and other disciplinary actions consistent with the School's Code of Conduct, Board policies and/or legal authorities.
- I will ensure my behavior adheres to the safe, inclusive and accepting School's Code of Conduct.

**For devices I own, I further agree to:**

- Protect my device from loss, damage or theft.
- Keep the device up to date and legal, including antivirus, while using NPSC network. (i.e. commercial software has been purchased).
- Ensure that software and firmware is up to date as recommended by the manufacturer, while using NPSC network.
- Not run host servers on my device, including web servers, ftp servers, mail servers, file sharing and peer to peer, while using NPSC network.
- Never use any form of electronic communications to harass, frighten or bully anyone.
- Follow the direction of school staff with respect to the use of a personal electronic device.

LAST NAME: \_\_\_\_\_  
(Print)

FIRST NAME: \_\_\_\_\_  
(Print)

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**PARENT/GUARDIAN CONSENT:**

- I have read and understand the Nipissing-Parry Sound Catholic District School Board's Student Responsible Use of Technology Agreement /Guidelines.
- I recognize that this Agreement is designed for my child's grade level and that the full Board policy: **Usage of The Board's Computer Network and Internet (AG 34.0)** can be found at [www.npsc.ca](http://www.npsc.ca).
- I will stress the ethical and responsible use of technology and caution my child about unsafe interaction with others on the Internet.
- I grant permission for my child to access networked information technology, including the Internet and email for educational purposes.
- I am aware that my child will be given instruction in the proper use of the Internet at school and further recognize that I am responsible to supervise my child's use of the computer and Internet outside of the school premises.
- I will ensure that media and software on my child's personal electronic device (if applicable) has been purchased and is legal.
- I understand that the School/Board will not service my child's personal electronic device, nor will it be liable in the event that the device is lost, stolen, damaged, or otherwise rendered inoperable.
- I understand that the Board will from time to time and without prior notice to the student access and/or monitor the Board's Electronic Information Systems.

PARENT NAME: \_\_\_\_\_  
(Print)

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

## Information About this Application

The Application for Direction of School Support form enables any person to apply to have their school support included or revised on the assessment roll by sending the completed form to the Municipal Property Assessment Corporation. The collection of the information on the form is authorized under the *Assessment Act*, and any personal information is confidential and protected under the *Freedom of Information and Protection of Privacy Act*. Any contact information shared is used to clarify the form details by telephone is not stored.

The information will be used to prepare voters' lists for municipal and school board elections; and to help with municipal and school board planning.

Included below are instructions to help you complete each section of the form. **If you have any questions about this form or about school support, please contact your local Public or Separate School Board.**

### How To Complete this Application

Changes submitted through an Application for Direction of School Support will be reflected in the following taxation year.

#### MPAC 19-Digit Roll Number

Property owners can find their 19-digit roll number on a recent Property Assessment Notice (PAN). If you don't have access to your PAN, please contact the Customer Contact Centre at 1-866-296-6722 (toll free) or 1-877-889-6722 (TTY), Monday to Friday – 8 a.m. to 5 p.m.

#### A Resident

Every person in your household should be listed. Put the family name first, followed by given name(s). Owners or tenants are listed first, followed by spouses, all children, and other occupants (if there are more than four individuals, please include an additional form). If this form is not for your permanent home (for example, if it is for your cottage or your business), only owners, tenants and spouses should be listed - children and other occupants should not be listed.

#### B Occupancy Status

Is this person an owner, tenant, spouse, child, boarder or other resident?

#### C School Support

**Roman Catholic** - includes Greek and Ukrainian Catholics

#### French-language Education Rights

You have French-language education rights if you are a Canadian Citizen and can answer "yes" to any one of the following questions:

1. Is French the language you first learned and still understand?
2. Did you receive your elementary school instruction in Canada in French? (This does not include French immersion or French as a second language.)
3. Have any of your children received, or are they now receiving, elementary or secondary school instruction in Canada in French? (This does not include French immersion or French as a second language.)

#### School Board

Persons who are **not** Roman Catholic and do **not** have French-language education rights, must be English-Public school supporters/electors.

Persons who are **not** Roman Catholic but do have French-language education rights, must be either English-Public or French-Public school supporters/electors.

Roman Catholics who do **not** have French-language education rights must be either English-Public or English-Separate school supporters/electors.

Roman Catholics who have French-language education rights, may be a supporter/elector for any one of the following school boards: English-Public, English-Separate, French-Public or French-Separate.

If you do **not** indicate which school board you support, it will be assumed that you are an English-Public school supporter/elector.

#### \* Attestation of Unit Support

You have received consent from the individual(s) residing in the same unit and are authorized to make a designation of school support on their behalf. By signing and submitting this form, you certify that the information you provide is true and accurate. It is a punishable offence under the laws of Canada to misrepresent one's identity or to knowingly provide false or misleading information and MPAC reserves the right to share information with law enforcement authorities where suspicious activity is detected or fraud is suspected.





## Application for Direction of School Support under Section 16 of the Assessment Act

An application must be made to the Municipal Property Assessment Corporation to include or revise school support on the assessment roll.

Instructions: See reverse. You can also update your school support on mpac.ca.

MPAC 19-digit roll number (if known)

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Please enter or revise my school support-designation on the assessment roll in accordance with the following information.

<b>Municipality</b>	<b>Address of Property</b>	<b>Unit/Apt</b>
<b>Mailing Address — if different from above</b> Street No., Name, P.O. Box, R.R. #		
City	Province	Country
Postal Code		
<b>Email Address</b>		
<b>Business Address — if self-employed or in partnership in business</b> Street No., Name, P.O. Box, R.R. #		
City	Province	Country
Postal Code		

Please answer all questions below

	B Occupancy Status	C School Support (see instructions)				
<b>A Resident</b> (please print and list applicant first) List all occupants, including ALL children.	1. Owner 2. Tenant 3. Spouse 4. Child, boarder, etc.	<b>This person lives:</b> 1. at above address 2. elsewhere on this property 3. elsewhere in this municipality 4. in another municipality	Roman Catholic?  (Does not include Greek Orthodox)	French-language Education Rights?	<b>Supporter/Elector for:</b> 1. English-Public 2. English-Separate (Catholic) 3. French-Public 4. French-Separate (Catholic) 5. Protestant-Separate (Penetanguishene Only)	
	Last Name	First Name				
<b>Birth</b> Year   Month   Day	Canadian Citizen yes <input type="radio"/> no <input type="radio"/>	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/>	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/>	yes <input type="radio"/>  no <input type="radio"/>	yes <input type="radio"/>  no <input type="radio"/>	1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 <input type="radio"/>
<b>Birth</b> Year   Month   Day	Canadian Citizen yes <input type="radio"/> no <input type="radio"/>	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/>	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/>	yes <input type="radio"/>  no <input type="radio"/>	yes <input type="radio"/>  no <input type="radio"/>	1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 <input type="radio"/>
<b>Birth</b> Year   Month   Day	Canadian Citizen yes <input type="radio"/> no <input type="radio"/>	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/>	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/>	yes <input type="radio"/>  no <input type="radio"/>	yes <input type="radio"/>  no <input type="radio"/>	1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 <input type="radio"/>
<b>Birth</b> Year   Month   Day	Canadian Citizen yes <input type="radio"/> no <input type="radio"/>	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/>	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/>	yes <input type="radio"/>  no <input type="radio"/>	yes <input type="radio"/>  no <input type="radio"/>	1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 <input type="radio"/>
<b>Indicate area occupied:</b> (✓)	Whole Home <input type="radio"/>	Base Apt. <input type="radio"/>	1st Floor <input type="radio"/>	2nd Floor <input type="radio"/>	3rd Floor <input type="radio"/>	Owner or tenant of this property since: Year   Month   Day
Name of School Board Personnel is hereby authorized to act as agent in matters of school support designation in respect to the above-mentioned property(ies) on behalf of the undersigned.						
Signature of Owner or Tenant	Year   Month   Day	Signature of Owner or Tenant	Year   Month   Day			
<b>*Attestation of Unit Support</b> (✓) If multiple School Support options are selected above, please indicate which school board you want to support. yes <input type="radio"/> no <input type="radio"/>						
<input type="radio"/> English-Public <input type="radio"/> French-Public <input type="radio"/> Protestant-Separate <input type="radio"/> English-Separate (Catholic) <input type="radio"/> French-Separate (Catholic)						

The personal information that you provide is collected by MPAC under the authority of sections 10, 11, 14, 15, 16 and 16.1 of the Assessment Act. Pursuant to MPAC's statutory obligations, your personal information will be used primarily for property valuation and assessment purposes, but will also be used for municipal and school board planning purposes, preparation of the Preliminary List of Electors which is used by municipalities and school boards to create the final Voters' Lists used for election purposes, and population reports. In addition, MPAC may use your information to obtain feedback, conduct surveys and enhance the aforementioned program delivery. If you have questions regarding this collection, please contact an MPAC Customer Service Representative at 1 866 296-6722 or by TTY at 1 877 889-6722 or by mail to MPAC, 1340 Pickering Parkway, Suite 101 Pickering ON L1V 0C4. MPAC takes privacy very seriously and we are committed to the protection of your personal information under the Municipal Freedom of Information and Protection of Privacy Act. MPAC will only access, use and disclose your personal information with your consent or where it is permitted or required by law.