

Parent / Guardian Information

Parent / Guardian 1

☐ Mr. ☐ Mrs. ☐ Ms. ☐ Other: _____

Last Name _____

First Name _____

Address _____

Relationship to Student _____

Contact # _____

Email Address _____

Place of Employment _____

Parent / Guardian 2

☐ Mr. ☐ Mrs. ☐ Ms. ☐ Other: _____

Last Name _____

First Name _____

Address _____

Relationship to Student _____

Contact # _____

Email Address _____

Place of Employment _____

Medical Management Plan

Medication Management Plan in Place? ☐ Yes ☐ No

☐ Anaphylaxis ☐ Asthma ☐ Diabetes ☐ Seizures ☐ Other: _____

☐ As legal parent/guardian of the above named student, **I do give the school permission** to share information with staff to support this student's Medical Management Plan/Emergency Action Plan.

☐ As legal parent/guardian of the above named student, **I do not give the school permission** to share information with staff to support this student's Medical Management Plan/Emergency Action Plan.

Health Card # _____

Freedom of Information and Protection of Privacy

☐ I give my consent for the name, photograph, and details of achievement of my child to be displayed/and or published for recognition in the school.

☐ I give my consent with the following restrictions: _____

The personal information you have provided on this form and any other correspondence relating to your involvement in our program is collected by the Lakehead District School Board under the authority of the Education Act (R.S.O. 1990 c.E.2) ss. 58.5, 265 and 266 as amended. The information will be used to register and place the student in a school, or for a consistent purpose such as the allocation of staff and resources and to give information to employees to carry out their job duties. In addition, the information may be used to deal with matters of health and safety or discipline and is required to be disclosed in compelling circumstances or 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, contact the school Principal. Updated 2011.

Required Signatures

These signatures represent acknowledgment of intentions, information, and choices for course selection.

Parent / Guardian Signature

Date

Student Signature

Date



WELCOME TO GRADE 9

Student Information
Grade 9 Course Selection 2025-26
Parent/Guardian Information

EXTERNAL

Superior CVI

This form is for students who do not currently attend a Lakehead Public Schools Elementary School

Student Information

Legal Last Name _____ Preferred Last Name _____

Legal First Name _____ Preferred First Name _____

Middle Name(s) _____ Date of Birth _____
MM/DD/YYYY

Gender _____ Primary Contact # _____

Pronouns ☐ She/Her ☐ He/Him ☐ They/Them

Address _____ Postal Code _____

Current Elementary School _____ Gr. 8 Program: ☐ English ☐ French Immersion

High School

Superior Collegiate and Vocational Institute



Grade 9 Registration Checklist

- ☐ Complete this Welcome to Grade 9 form
- ☐ Include a copy of your most recent Grade 8 Report Card
- ☐ Provide proof of address for verification to the Superior CVI main office (i.e. utility bill or tax assessment)
- ☐ Provide proof of citizenship to the Superior CVI main office (i.e. birth certificate or passport)
- ☐ IB applicants - students must also complete the "student application for IB" on the LPS website or scan the QR code
- ☐ IEP/IPRC - Provide a copy of most recent IEP and assessment



Office Use Only:

- ☐ Proof of address verified Initials: _____
- ☐ Proof of citizenship verified Initials: _____

Return to the high school or submit by email
to supe_registration@lakeheadschoos.ca before February 24, 2025

If you require more information, please contact Superior Student Services at (807) 768-7284



GRADE 9 COURSE SELECTION

In Grade 9, students will have eight (8) courses scheduled on their timetable. This includes the five (5) compulsory credits listed below, as well as 3 additional courses.

Navigating Grade 9 Pathways

Grades 9 and 10 are the time when students are learning about themselves as learners and the possible pathways they may take. For this reason, Ontario schools no longer require students to pick their academic pathway in Grade 9. This means that students no longer choose between Academic and Applied in Grade 9, providing all students with the opportunity to explore a variety of subjects and discover their interests.

You and your parent(s) will need to decide if you wish to take French or FNMI Language: Ojibwe as your final compulsory course.

Compulsory Courses

Mathematics	<input type="checkbox"/> IB Prep	<input type="checkbox"/> De-streamed	<input type="checkbox"/> LDCC
English	<input type="checkbox"/> IB Prep	<input type="checkbox"/> De-streamed	<input type="checkbox"/> LDCC
Science	<input type="checkbox"/> IB Prep	<input type="checkbox"/> De-streamed	<input type="checkbox"/> LDCC
French or FNMI Language: Ojibwe	<input type="checkbox"/> IB Prep	<input type="checkbox"/> Academic	<input type="checkbox"/> Exempt
		<input type="checkbox"/> Level 1	<input type="checkbox"/> Level 2
Geography	<input type="checkbox"/> IB Prep	<input type="checkbox"/> De-streamed	

If submitting an application for the IB Programme, students must select all the IB Prep compulsory courses in grade 9.

Additional Courses

Each student in Grade 9 is required to select 4 additional courses from the list below. By the end of Grade 10, students will need to complete both a Health and Physical Education credit and a Technology credit. Students may still select both these options in Grade 9.

* IB students are encouraged to make Health and Physical Education (PPL101) their first elective, as this course helps them meet the overall requirements of the IB Programme.

Please rank your elective course requests on the line beside the course name.

1 = First Choice

2 = Second Choice

3 = Third Choice

4 = Fourth Choice

Your fourth choice will only be used should your timetable not accommodate your first three choices.

- | | | |
|-------|--------------------------------------|--------|
| _____ | Building the Entrepreneurial Mindset | BEM101 |
| _____ | Dance | ATC101 |
| _____ | Drama | ADA101 |
| _____ | Expressions of FNMI Cultures | NAC101 |
| _____ | *Health and Physical Education | PPL101 |
| _____ | Music - Band | AMI101 |
| _____ | Music - Strings | AMS101 |
| _____ | Technology and the Skilled Trades | TAS101 |
| _____ | Visual Arts | AVI101 |

Student Success and Special Education Information

<input type="checkbox"/> IPRC	Identification _____
<input type="checkbox"/> IEP	
<input type="checkbox"/> ELL (English Language Learner)/MLL (multi-language learner)	Subject(s) _____
Language spoken at home: _____	<input type="checkbox"/> Student is working significantly below grade level
	<input type="checkbox"/> Student is at risk of being placed, not promoted
	<input type="checkbox"/> Student requires literacy support
	<input type="checkbox"/> Student requires numeracy support

Comments / Strategies if applicable: _____

First Nations, Métis and Inuit (FNMI) Voluntary Student Self-Identification

Self-identification allows students to access additional learning supports, volunteer and employment opportunities and potential scholarships and awards.

This student is:

☐ First Nations (Status, Non-Status) ☐ Métis ☐ Inuit ☐ Non-Indigenous ☐ I do not wish to participate

Language(s) spoken at home:

☐ English ☐ French ☐ Ojibwe ☐ Oji-Cree ☐ Cree ☐ Other:

First Nation responsible for student's tuition (if applicable):

Community/Nation:

Transportation

When attending high school most requests for transportation will be accommodated. There will be cases when a student's request cannot be granted due to distance, time, scheduling and school hours. Requests will be considered within existing Board resources and scheduling. Please contact Dave Covello (dcovello@lakeheadschoools.ca) if you have questions.