

Parent / Guardian Information

Parent / Guardian 1

Mr. Mrs. Ms. Other: \_\_\_\_\_

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Relationship to Student \_\_\_\_\_

Lives with student ☐ Yes ☐ No

Custody ☐ Yes ☐ No

Address \_\_\_\_\_

Postal Code \_\_\_\_\_

Contact Number \_\_\_\_\_

Email Address \_\_\_\_\_

Place of Employment \_\_\_\_\_

Work Contact Number \_\_\_\_\_

Parent / Guardian 2

Mr. Mrs. Ms. Other: \_\_\_\_\_

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Relationship to Student \_\_\_\_\_

Lives with student ☐ Yes ☐ No

Custody ☐ Yes ☐ No

Address \_\_\_\_\_

Postal Code \_\_\_\_\_

Contact Number \_\_\_\_\_

Email Address \_\_\_\_\_

Place of Employment \_\_\_\_\_

Work Contact Number \_\_\_\_\_

Medical Management Plan

Medical 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.

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 2026-27  
Parent/Guardian Information

EXTERNAL

Westgate 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 Ontario Education Number (OEN) #: \_\_\_\_\_

Address \_\_\_\_\_ Postal Code \_\_\_\_\_

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

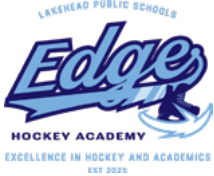
High School

Westgate Collegiate and Vocational Institute



Expression of Interest

☐ Check if your student is interested in the EDGE Hockey Academy for grades 9–10. Admission is not guaranteed and requires an additional application. Families must provide transportation to the rink on ice days.



Grade 9 Registration Checklist

- ☐ Complete this Welcome to Grade 9 form
- ☐ Include a copy of your most recent Grade 8 Report Card
- ☐ Bring a proof of address for verification (i.e. utility bill or tax assessment)
- ☐ Bring proof of citizenship (i.e. birth certificate or passport)
- ☐ IEP/IPRC - Provide a copy of most recent IEP and assessment

Return to the high school or submit by email  
to west\_registration@lakeheadschoos.ca before February 24, 2026

If you require more information, please contact Westgate Student Services at 577-4251



# 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

In Grade 9, many students start in a common program, giving them the chance to experience a variety of subjects and discover their interests. As students begin planning for future years, families may want to discuss options such as specialized programs (e.g., IB or AP) and locally developed courses to ensure choices align with student interests and needs.

Families are asked to choose which second language course their Grade 9 student will take: French or Ojibwe. Students who have previously studied Ojibwe in elementary school, or speak the language at home, may select Level 2.

### Compulsory Courses

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

### Additional Courses:

- Students must earn one technology credit by the end of Grade 10 (in either Grade 9 or 10).
- Students who have expressed interest in the LPS EDGE Hockey Academy should select PAL10H/PAI10H. These two courses will account for two credits. If the student does not join the LPS EDGE Hockey Academy, their additional selections will be used instead.

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

5 = Fifth Choice\*\*

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

\*\*Students interested in EDGE Hockey Academy MUST select a fifth choice, as acceptance is not guaranteed.

Students interested in the EDGE Hockey Academy select PAL10H/PAI10H as their first choice. These students should also make a 5th choice as acceptance is not guaranteed.

### Student Success and Special Education Information

☐ IPRC

Identification \_\_\_\_\_

☐ IEP

☐ ELL (English Language Learner)/MLL (multilingual learner)

Subject(s) \_\_\_\_\_

Language(s) spoken at home: \_\_\_\_\_

☐ Student is working significantly below grade level

☐ Student is at risk of being placed, not promoted

☐ Student requires literacy support

☐ 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

Transportation is provided only to your zoned high school and for specialized programs such as IB and French Immersion. Students wishing to attend an out-of-zone high school will need to find their own transportation.

Use the QR code to check eligibility.

