

# 2018 - 2019 Assessment Form



| Office Use Only  |                      |
|--|----------------------|
| OEN: _____   |                      |
| August 14 <sup>th</sup> deadline applies to this student | Yes or No            |
| Day School Summer Student (Summer Register)              | Yes or No            |
| OSR is at _____  | Date Requested _____ |

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Last Name at Birth: \_\_\_\_\_  
First Name Middle

Mailing Address: \_\_\_\_\_ P.O. Box #: \_\_\_\_\_

Town: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Tel: \_\_\_\_\_ Mobile: \_\_\_\_\_ Permission to Text? Yes / No Initial \_\_\_\_\_

Date of Birth: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Day / Month / Year

Last High School Attended: \_\_\_\_\_ Year Entered \_\_\_\_\_  
Year Left \_\_\_\_\_

Did you start Grade 9 in an Ontario Publicly Funded Secondary School? **Yes / No**

Did you have an I.E.P. (Independent Education Plan) at your High School? **Yes / No**

Were you previously registered with an Adult Education Centre? **Yes / No** If yes, where: \_\_\_\_\_ Year: \_\_\_\_\_

Status in Canada:  Canadian Citizen  Immigrant/Refugee  Native Ancestry

Province of Birth: \_\_\_\_\_ Country of Birth: \_\_\_\_\_ First Language Spoken: \_\_\_\_\_

Date of Entry to Canada: \_\_\_\_\_ Are you a Crown Ward? Yes \_\_\_ No \_\_\_

Are you applying to a college or university? Yes / No If yes: Where: \_\_\_\_\_

OCAS/OUAC Number: \_\_\_\_\_

Name of Program: \_\_\_\_\_ Start Date: \_\_\_\_\_

Are there any health concerns you would like us to know about, for example, do you carry an epi-pen? Yes \_\_\_ No \_\_\_  
If you answered yes, please explain: \_\_\_\_\_

Personal information on this form is collected under the authority of the *Education Act* and will be used for educational, health and welfare purposes affecting the student. Questions about this collection should be directed to the Principal or Superintendent of Education, Avon Maitland District School Board, 62 Chalk Street North, Seaforth, N0K 1W0 telephone (519) 527-0111 or (800) 592-5437. **REVISED June 2009**

Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_

