



**PORT CREDIT SECONDARY SCHOOL
STRINGS PROGRAM
GRADE 9 COURSE SELECTION – 2018-2019
www.pcsonline.com**

Mailing Address:
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Email: stringspcss@peelsb.com

Last Name

First Name

Ontario Education Number

Current Grade 8 School

Birth Date: ____/____/____
Year Month Day

ALL STUDENTS MUST CHOOSE EIGHT (8) COURSES. PLEASE CHECK THE APPROPRIATE LEVEL

COMPULSORY COURSES

	ACADEMIC	APPLIED
SCIENCE	<input type="radio"/> SNC1D0	<input type="radio"/> SNC1P0
ENGLISH	<input type="radio"/> ENG1D0	<input type="radio"/> ENG1P0
MATH	<input type="radio"/> MPM1D0	<input type="radio"/> MFM1P0
GEOGRAPHY	<input type="radio"/> CGC1D0	<input type="radio"/> CGC1P0
FRENCH	<input type="radio"/> FSF1D0	<input type="radio"/> FSF1P0

OPEN LEVEL COURSES

STRINGS (worth 2.0 credits)	<input type="radio"/> AMS1OR	
Choose <u>one</u> HEALTHY ACTIVE LIVING course:	<input type="radio"/> PPL1OF Girls' Phys.Ed.	<input type="radio"/> PPL1OM Boys' Phys.Ed.

OFFICE USE ONLY

LEARNING STRATEGIES	<input type="radio"/> GLE1O0 (identified) <input type="radio"/> GLS1O0 (non-identified)	<input type="radio"/> Voc Candidate	<input type="radio"/> Elementary Guidance Counsellor Approval: _____
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Student Signature

Parent Signature

**** If any personal information (address/phone/custody/emergency contact/citizenship) is changing over the summer, please see the office manager at your elementary school to fill out the Student Registration Form and attach a copy of the supporting documentation.****