

**\*\*\* STUDENTS WILL WRITE THE EXAM AT THE SCHOOL OF THEIR FIRST CHOICE \*\*\***  
**SATURDAY, OCTOBER 29, 2016 FROM 8:30 A.M. TO APPROXIMATELY 11:00 A.M.**

**LESTER B. PEARSON SCHOOL BOARD**  
**REGISTRATION FOR SECONDARY SCHOOL ENRICHMENT PROGRAMS**

Student Family Name: \_\_\_\_\_

Student First Name: \_\_\_\_\_

M  
 F

Current School: \_\_\_\_\_

Student Address:

Civic No \_\_\_\_\_

Street \_\_\_\_\_

Town \_\_\_\_\_

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

Name of person(s) responsible of the student:

Mrs./Ms./Mr.: \_\_\_\_\_  Mother  Father  Guardian

Work phone #: \_\_\_\_\_ Cell phone #: \_\_\_\_\_

e-mail \_\_\_\_\_

Mrs./Ms./Mr.: \_\_\_\_\_  Mother  Father  Guardian

Work phone #: \_\_\_\_\_ Cell phone #: \_\_\_\_\_

e-mail \_\_\_\_\_

**A LIGHT SNACK WILL BE PROVIDED.**

FOOD ALLERGIES: NO  YES  \_\_\_\_\_  
(PLEASE SPECIFY)

**P L E A S E**

1. **Return this form to the high school where the student will write the entrance exam.**
2. Return the completed form to the high school no later than **Friday, October 21, 2016** with:
  - A **PHOTOCOPY** of the final Grade 5 Report Card;
  - A **non-refundable** registration fee of **\$40.00**. **Please make the check payable to the school where your child will write the entrance exam.**

Examination results can be sent upon parental request for consideration to another high school(s). An additional fee of \$10.00 will apply, making the total non-refundable registration fee \$50.00.

Please send the results of the Entrance Examination to the following high school(s):

\_\_\_\_\_  
Print name of high school(s) and Program Requested

**INFORMATION FOR PARENTS TO KEEP.**

- Entrance examinations will be held at each L.B.P.S.B. high school on **SATURDAY, OCTOBER 29, 2016** from **8:30 am to approximately 11:00 am**. Please be at the high school by 8h15 am.
- **SNACK** will be provided.
- Students must bring **PEN, PENCIL, ERASER, CALCULATOR and RULER**.