



STUDENT NAME:	FVDES STUDENT #
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GRADE:	Grad Program: <input type="checkbox"/> 2004 <input type="checkbox"/> 1996 <input type="checkbox"/> 1986 <input type="checkbox"/> 1950 (Adult)
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Requested Courses for Current Enrollment	Online ✓	Paper ✓	Resources Required	Prov Exam Session	Course Fee	Resource Deposit

Optional Planned Courses for Future Enrollment (Activation Assignment due on course registration)

Optional Planned Courses for Future Enrollment (Activation Assignment due on course registration)	Online ✓	Paper ✓	Resources Required	Prov Exam Session	Course Fee	Resource Deposit

- My learner strengths are: _____
- My learner weaknesses are: _____
- My career goals are: _____
- I understand that I must work at a pace set in consultation with my FVDES Counsellor and/or Teachers.
- By signing this form, I agree to begin this program immediately, and submit completed assignments regularly.
- I will comply with the FVDES Online Acceptable Use Policy posted on the website.
- I am aware that failure to submit work regularly will result in withdrawal from the course.
- I am aware that I must complete this course within one year of enrollment.
- FVDES School of Record students: I agree to meet the Ministry of Education's weekly physical activity requirements.

_____	_____	_____
Student signature	Parent/Guardian signature	FVDES Counsellor signature
_____	_____	_____
Date	Date	Date