

Durham Continuing Education – eLearning Registration Package Instructions

Checklist for registering: This is not the registration sheet. These are the instructions for completing all the registration sheets needed to enrol in an eLearning course. *Do not fill out these sheets.*

1. Download each registration document to your computer and save each document. Then, open each file, type in your information. Re-save each file.
2. Email your completed registration materials to: DCE.elearning@ddsb.ca
3. You will receive an email notification when we receive your registration materials

Instructions for completing registration materials:

STEP 1 - Form 2c – Course Selection Sheet – eLearning

2c

DURHAM CONTINUING EDUCATION COURSE SELECTION SHEET - eLearning



Are you a new eLearning student or a returning eLearning student? <input type="checkbox"/> New <input type="checkbox"/> Returning	Are you currently taking or planning to take a Learn@Home Course while also taking your eLearning course? <input type="checkbox"/> Yes <input type="checkbox"/> No	Citizenship – Office Use Only <input type="checkbox"/> Complete <input type="checkbox"/> Incomplete	2019/2020 June 28, 2019
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1. Please check whether you are a New eLearning student or a returning eLearning student
2. Please check whether you are **registered for, or plan to be registered for**, a Learn@Home Correspondence course during the time period you will be taking your eLearning course

3. Section 1 – Demographics

1. Please complete all sections fully. Under Proof of Age Document, check the option for the document you will be providing a copy of with this registration package

Section 1 - DEMOGRAPHICS (Basic Student Information)					
Legal Last Name		Legal First Name		Legal Middle Name	
				<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	
Date of Birth			Home Phone Number		
Month	Day	Year	<input type="checkbox"/> Unlisted <input type="checkbox"/> Cell Number		
House Number	Street Name		Apt/Unit	City/Town	Postal Code
Mailing Address			Email Address (PRINT CLEARLY AND LEGIBLY)		
<input type="checkbox"/> Same as above					
Proof of Age Document <i>(A copy must be attached with your registration application)</i> <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Landed Immigrant <input type="checkbox"/> Citizenship Card <input type="checkbox"/> Passport <input type="checkbox"/> Student Visa <input type="checkbox"/> Permanent Resident Card					
Emergency Contact		Emergency Contact Phone Number		Student Health Card #	
Do you have any health conditions and/or allergies that are life threatening?			I choose not to disclose <input type="checkbox"/> Please initial here: _____		
Yes <input type="checkbox"/> No <input type="checkbox"/>					
If YES, please give details:			Student wears MedicAlert® <input type="checkbox"/>		
			Registration No. _____		
If, in the case of illness or accident my emergency contact cannot be reached by telephone, I hereby grant authority to the Principal or designate to call an ambulance					
Yes <input type="checkbox"/> No <input type="checkbox"/>					

4. Section 2 – Admission (Citizenship)

- a. Please complete all sections fully
- b. State your country of birth
 - i. If you were born in Canada, state that where required and indicate what province you were born in
 - ii. If you were born outside of Canada, please indicate the year and month of your entry to Canada**
 - 1. You will also need to submit a copy of your Citizenship Documentation – choose from the options listed and send in a copy with your registration package

Section 2 - ADMISSION (Citizenship)		
Country of Birth	If Canada, province of birth:	If outside Canada, please list Date of Entry: Year: _____ Month: _____
Citizenship Documentation (If you were born outside Canada, a copy must be attached with your registration application):		
<input type="checkbox"/> Canadian Citizenship Card <input type="checkbox"/> Canadian Passport <input type="checkbox"/> Other Visa <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Student Visa <input type="checkbox"/> Refugee Status		
First Language:	All parents/guardians of Aboriginal students, and students who are 18 years or older, have the right to voluntarily and confidentially self-identify their Aboriginal ancestry. If the student is considered to be of Aboriginal ancestry, please check the appropriate box: <input type="checkbox"/> First Nations <input type="checkbox"/> Métis <input type="checkbox"/> Inuit	

5. Section 3 – Education

- a. Please complete fully
- b. If you have a copy of your most recent transcript, send it in with your registration package

Section 3 - EDUCATION		
Previous School Name	Date Last Attended	Did you graduate? Yes <input type="checkbox"/> Year: _____ No <input type="checkbox"/> Last grade completed: _____

6. Section 4 – How Did You Find Out About DCE’s eLearning Program?

- a. Please check the appropriate box or boxes

Section 4 – HOW DID YOU FIND OUT ABOUT DCE's eLearning PROGRAM?		
In order to help us to find future students and to advertise and market our programs effectively, please tell us how you found out about Durham Continuing Education's eLearning program. (Check all that apply please)		
<input type="checkbox"/> Google Search and then looked at DCE Website (www.dce.ca) <input type="checkbox"/> Saw a Google online ad <input type="checkbox"/> Saw DCE's Online Course FlipBook <input type="checkbox"/> Saw DCE'S Facebook page <input type="checkbox"/> Saw a tweet from the DCE Twitter Feed <input type="checkbox"/> Saw an ad on my cell phone, tablet or mobile device <input type="checkbox"/> Watched a YouTube Video about DCE's programs <input type="checkbox"/> Saw an ad or information on www.durhamregion.com website <input type="checkbox"/> Read an article online about DCE's programs <input type="checkbox"/> Saw a presentation about DCE	<input type="checkbox"/> Guidance Counsellor <input type="checkbox"/> College/Univ. Counsellor <input type="checkbox"/> ODSP Counsellor <input type="checkbox"/> Ontario Works Counsellor <input type="checkbox"/> Friend/Relative recommendation	<input type="checkbox"/> Saw the digital sign outside E. A. Lovell School <input type="checkbox"/> Saw a brochure <input type="checkbox"/> Saw a newspaper ad

7. At the top of page 2, please fill in the required demographic information about yourself again

<input type="checkbox"/> M	Legal Last Name: _____	Legal First Name: _____	Legal Middle Name: _____	DOB Month / Day / Year
<input type="checkbox"/> F				

8. Section 5 (Course selection)

a. Please list the course code (**not the course name**) for the course or courses you want to sign up for (list under “2020 Spring Term – Feb. 12, 2020 to May 21, 2020”)

Section 5 – Course Selection (Only Fill in the Course Code (Up to 2 per semester). Do Not Fill in Shaded Areas)						
2019 Fall Term - Sept 18, 2019 to Dec 18, 2019						
Courses	Sec. #	Counsellor Initials & Date	Ent'd	DROP COURSE Counsellor Date & Initials	Ent'd	NOTES
	95					
	95					
2020 Spring Term – Feb 12, 2020 to May 21, 2020						
Courses	Sec. #	Counsellor Initials & Date	Ent'd	DROP COURSE Counsellor Date & Initials	Ent'd	NOTES
	96					
	96					

b. Do not fill in anything in the shaded sections
c. Course options are:

Grade 11 Courses		Grade 12 Courses	
Course Name	Course Code (Use this to complete this section)	Course Name	Course Code (Use this to complete this section)
Biology	SBI3C	International Business	BBB4M
		English	ENG4C
		English	ENG4U
		Literacy Course	OLC4O
		World Cultures	HSC4M
		Math (College)	MAP4C
		Chemistry (College)	SCH4C
		Physics (College)	SPH4C

9. Section 6 – Student Registration Waiver

a. Please read carefully and check the appropriate box for each statement

Section 5 - Student Registration Waiver – Please read carefully, and check appropriate box:

I have read the Acceptable and Safe Use Procedure form and will abide by the guidelines while accessing the internet at school.	<input type="checkbox"/> I give consent <input type="checkbox"/> I do not give consent
My school work may be displayed in school buildings, school, or board publications and/or website articles in the media.	<input type="checkbox"/> I give consent <input type="checkbox"/> I do not give consent
My photograph/visual likeness may be displayed in school buildings, school, or board publication and/or website articles in the media.	<input type="checkbox"/> I give consent <input type="checkbox"/> I do not give consent
I give permission for my name and phone number to be used by School Community Councils for the purpose of sharing school information.	<input type="checkbox"/> I give consent <input type="checkbox"/> I do not give consent
I consent to the transfer of my Ontario Student Record (OSR) from my last school when necessary.	<input type="checkbox"/> I give consent <input type="checkbox"/> I do not give consent

10. Section 7 – Agreement of Understanding

a. Please read carefully and sign and date

Section 7 - Agreement of Understanding - Please read carefully, complete and sign:

- To the best of my knowledge, the information on this form is correct.
- I understand that:
 - ~~until~~ all required documentation is complete i.e. proof of citizenship, etc., my registration is NOT complete and MY SEAT WILL NOT BE HELD.
 - courses are subject to cancellation on short notice, but I may be allowed to make alternate choices, space permitting.
 - repeating a course will not result in earning an additional credit.
 - after the full disclosure date my results will show on my transcript.
- It is my responsibility to:
 - immediately advise the school of changes in the information stated on this form.
 - take my DCE report card to the previous high school I attended to have credit(s) added to my Ontario Student Transcript if my OSR is not ordered.
 - check course selections carefully to avoid duplication of credits.
- I understand that I must complete all course work/assignments/discussion forums within the timeframe of the actual course;
- I agree to write the final examination on the date and at the time stated at the start of the course;
- I understand that login access to the course will expire 3 weeks after the last day of the course;
- I understand that after the full disclosure date that my results will show on my transcript.
- I understand that I must apply to ontariocolleges.ca before published deadlines and that it is my responsibility to notify DCE to order transcripts and/or request electronic transmission of marks. If I am applying to University (OUAC), I understand that electronic marks **CAN NOT** be sent and that it is my responsibility to request official letters and/or transcripts. I understand that it is my responsibility to book a diploma request appointment to verify that I have met the requirements of the diploma I am working towards.

Student's Signature: _____ Date: _____

Step 2 - Turn-It-In Acknowledgement Letter:

Please read, sign and date this form and email back with your registration package. **Please note, that all work submitted for evaluation is checked through the Turn-It-In database to ensure that it has not been plagiarized. By signing this form, you are agreeing that your work will be checked and that your work will be archived in the Turn-It-In system.**

Step 3 – Pupil Eligibility Attestation Form:

Complete the boxes at the top of the page. In the “Student or Representative” section near the bottom, print your name, sign your name and fill in the current date. **DO NOT FILL OUT ANY OTHER SECTIONS.** By signing and dating this form, you are certifying that the citizenship documents that you are sending in and all of the information on your registration are true and accurate.

Step 4 – Welcome to eLearning Letter

Please read this document carefully as it outlines the expectations for a student in the eLearning program. Please keep this sheet for your personal information.

DO NOT SEND THIS DOCUMENT BACK WITH YOUR REGISTRATION PACKAGE.

Step 5 – Student Information Sheet

Please keep this sheet for your personal information, as it includes important dates and information on how to get technical support once you start your course.

DO NOT SEND THIS DOCUMENT BACK WITH YOUR REGISTRATION PACKAGE.

Step 6 – Submitting your registration package:

Email the following documents to DCE.elearning@ddsb.ca, once you have completed them:

- a) Form 2C – Course Selection Sheet – eLearning
- b) Turn-It-In Acknowledgement Letter
- c) Pupil Eligibility Attestation Form
- d) Proof of age documentation
- e) Proof of Citizenship documentation (if you were born outside of Canada)
- f) Transcript from previous high school