Yorkland High School

3840 Finch Ave East, Toronto, ON M1T 3T4

Tel: 416-773-0005 | Fax: 416-773-0001 | Email: info@yorklandhighschool.com



STUDENT REGISTRATION FORM

			STUDEN	r info	RMATIO	N				
*Student's Name: Last Nam	ne	First Name		*Date	of Birth:	YY	YY-MM-DD	*Gender: [Male	☐ Female
*Student Residence Status	: Local	International		Citizer	ship:					
*Phone #:				*Student's Email:						
Current Mailing Address:	Apt/Unit	Street/District				City/Town	Provin	ce Countr	у Ро	stal Code
		ACA	DEMIC H	IISTOR'	AND P	LANS				
*Last School Attended:					*Highes		*Date C	ompleted irade:		YYYY-MM-DD
Address of the School:	Apt/Unit	Street/District				City/Town	Provin	ce Countr	y Po	estal Code
First Language:		Have you successfu	ully comp	leted ar	y English	Proficiency Tes	t within th	e last 2 year	s? 🗌 Ye	s No
Current IELTS Testing Over	all Band:		Listenii	ng:	Re	eading:	Writing	g:	Speakir	ng:
Program(s) of Interest at Yorkland High School:	☐ OSSD Grade 9 ☐ OSSD Grade 10 ☐ OSSD Grade 11 ☐ OSSD Grade 12 ☐ Elite Program ☐ UT Pathway Program							12		
Major / Program:	Arts & Engine	ering Busines	ter Scienc		lealth Sci		al Science			
Academic Year:			П	Ser	nester:	☐ Fall	☐ Winte	r Spri	ng 🗌	Summer
FC	OR APPLIC	ANTS LESS THAN			ONLY, PL		TE THIS	SECTION		
Father's Full Name:				Mother's Full Name:						
Father's Date of Birth:			YYYY-MM-D	D M	Mother's Date of Birth:					MM-DD
Father's Phone #:				М	Mother's Phone #:					
Father's Email:				М	Mother's Email:					
Address in home country:	nt/Unit	Shugah/Dinhuigh				City / Tayura		Causha	Dec	tal Cada
The above information is to information in order to con						City/Town AND HIGH SCHO X	Province	<u> </u>		kground
Student Signature						Date	2			

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CUSTODIAN PERMISSION								
As per the Canadian Government law, international students who are under 18 years of age are required to retain a Canadian citizen or permanent resident as the legal guardian of the student in Canada. The legal guardian will assume the role and responsibilities of a parent in case of emergency. If you require a guardian but don't have one, please contact us to arrange for a guardian.								
*Guardian's Name:	*Phone #:	Email:						
Mailing Address:								
Apt/Unit Street/District	City/Town	Province	Country Postal Code					
x		Χ						
Guardian Signature		Date						
APPLICA	TION CHECKLIST (OFFICE USE	ONLY)						
Please verify below if your application is complete:								
Registration Fee Payment								
Copy of Academic Transcripts (translated and notari	zed, where necessary)							
2 Recent Photographs								
Copy of Passport (with Canadian Visa, if applicable)								
Proof of English Language Proficiency (if applicable)								
I declare that the information I have provided on this fo information may lead to the rejection of my application High school to make my decision to enroll in the selecte transcript or education record or other details from the	or cancellation of my enrolment. ed program. I grant York land High	I have gained suffice school permission	cient information about Yorkland to obtain any official academic					
X		X						
Officer Signature		Date						

WE ENTER TO LEARN \cdot LEAVE TO ACHIEVE



YORKLAND HIGH SCHOOL

Yorkland High School is a co-educational, post-secondary preparatory day school that offers a comprehensive and progressive program in preparing our students for the real world. We are nestled in the commercial and residential area of Scarborough, Toronto, just minutes away from Highways 407 and 401. More importantly than our strategic location, Yorkland takes pride in creating a learning environment that is nurturing, supportive, and at the same time challenging and rewarding.