

95 Elizabeth Avenue St. John's, NL A1B 1R6 Tel: (709) 758-2372 Fax: (709) 758-2706 Web site: www.nlesd.ca

Student Information

2018 Public Exam Preparation Classes

The Newfoundland and Labrador English School District will be offering a 48 hour Public Exam Preparation Program (Night School) from **February to June 2018.** This program will be offered on **Tuesday (Math and English) or Thursday (Science and Social Studies)** evenings **(7:00 pm to 10:00 pm)** at Gonzaga High School, Smithville Crescent, St. John's. There will be no classes over Easter week and any sessions missed due to inclement weather will be made up throughout the program.

Electronic Registration will be open from **Monday**, **February 5th**, **9:00 am to Thursday**, **February 15th**, **4:00 pm**. **Participants can register by completing the registration form below and emailing to** <u>nicoleconstantine@nlesd.ca</u>

If the course being requested is NOT OFFERED, students will be contacted via telephone at the number given on the registration form by 4:00 pm on Monday, February 19th. Furthermore, a list of the courses being offered in the program will be posted to the nlesd.ca website before the start of classes on February 20th.

Participants will be required to pay the required fee of **\$185.00 per course** on either Tuesday, February 20th or Thursday, February 22nd, if the course being requested has sufficient enrolment to be offered. Cash/Debit/Visa/Mastercard will be available. No cheques accepted. No refunds will be issued after Friday, March 2, 2018.

For further information please call Nicole Constantine at 758-2704.

*****Registration Form on page below*****

STUDENT REGISTRATION FORM Public Examination Preparation Program (Night School) 2018 48 hour program (February 20/22, 2018 to June 12/14, 2018)

STUDENT REGISTRATION FORM

Last Name:	_First Name:	
Street:	_City/Town	
Postal Code:		
Telephone Number (Daytime and	d Cell):	
Date of Birth:(y (day)	ear)	_ (month)
lf student <u>is presently attending</u> school below.	Day School, indica	ate the name of the
School:		
If student is <u>not</u> presently attend location of the last school attend		dicate the name and
School		

School: _

Course(s) Requested	Previous Mark Attained or Current Average	
1.		
2.		

*As noted above, courses are only offered on the basis of sufficient enrolment.

Registration fee is **\$185.00 per course**, payable by cash, VISA, MasterCard, or debit card during the night of the first class. No cheques will be accepted.

Medical Condition(s):

Student Responsibilities:

I agree to be in regular attendance and obey all rules and regulations set by the teacher (s) and principal. I will arrive to class on time with all necessary supplies, prepared for instruction. I will respect the learning environment and behave responsibly. I realize that failure to comply with the above rules will result in my dismissal from classes with no refund of registration.

Signature of Student:	Date:	

Form to be signed during payment of registration fee.

Participants can register by emailing this completed form to nicoleconstantine@nlesd.ca

For Office Use: Receipt #: _____ Type of Payment: _____