Last Name:	First Name:	
<u>202</u>	Gordon Bell Pre-Registration Process: 22 – 2023 Students entering or Continuing in Grade 12	
June, but retur	list for GRADE 11, NON-GRADUATING GRADE 12 STUDENTS and POST HIGH (graduation of the courses) APPLYING FOR GRADE 12 classes in 2022 - 2023	
Please discuss	the following points with your parent(s) / guardian(s):	
webpa	o selecting your courses, we strongly encourage you to go to the Gordon Bell High Scage https://www.winnipegsd.ca/schools/GordonBell to consult the following resource and under the Student Resources → Pre-Registration Planning tabs): • Graduation Requirements: Learn how many credits are required and which special courses are needed for graduation. • Student Handbook: Read descriptions of all courses offered at Gordon Bell to go better understanding of what a course is about. • Math Info Sheet: Consult to help you figure out which Math stream is best for the English Info Sheet: English Comp is compulsory. It is also recommended that a Grade 12s take English Lit or Trans as an option, especially if going on to post-secondary education. • Post-Secondary Requirements: University and college programs often have prerequisites, require a minimum number of 40S classes, and may require you take a specific Math (i.e. Pre-Cal) or Science course (i.e. Biology, Chemistry, and Physics). When selecting elective courses, we strongly recommend you consult document first.	es ecific get a you. II
The co Please Note th	the chart on the back of this page to select the courses you wish to register for. The chart on the back of this page to select the courses you wish to register for. The chart on the back of this page to select the courses you wish to register for. The chart on the back of this page to select the courses you wish to register for. The chart on the back of this page to select the courses you wish to register for. The chart on the back of this page to select the courses you wish to register for. The chart on the back of this page to select the courses you wish to register for. The chart on the back of this page to select the courses you wish to register for. The chart on the back of this page to select the courses you wish to register for. The chart on the back of this page to select the courses you wish to register for. The chart of the chart	
Electiv	ve Courses: Select up to five courses. Rank them in order of preference, with 1 being the one you want the mo	ost.
	also be helpful to speak with teachers, your counsellor or Career Intern to help plan to ossible educational path. Please follow-up with them as needed.	:he
	your completed form with you when you pre-register here at school, as it will make it for you to fill out your online application.	:
Parent(s) / Gua	ardian(s):	
Wednesday Maselections for t	ighter will be registering on-line for next year's courses between Thursday, March 3 rd larch 9 th . The purpose of this sheet is to help your son / daughter plan their course the 2022-2023 school year. Please follow the steps above, and discuss with your their course selections.	and
to have signed	ng students will receive a printed copy of course requests that they will be bringing h I by you. Please use a pen to indicate any changes to address, phone number, etc. nese forms be returned to the main office <u>no later than Friday, March 11th.</u>	ome
Please sign ind sheet:	licating you have reviewed and approve of the course selections made on the back of	fthis
Parent/Guardi	ian Name (print): Date:	

Parent/Guardian Signature: _____

Last Name:	First Name:	
------------	-------------	--

Grade 12: 2022 – 2023

Course Pre-Selection Planning Sheet

Course Selections: Please refer to course handbook for course descriptions and prerequisites. (* = indicates a prerequisite is required to take course)

	co	MPULSORY	COURSES F	ROM PREV	IOUS YE	ARS		
Do yo	u have all compuls	ory Grades 9	, 10 and 11 c	ourses? Cir	cle any r	nissing c	redits	
-	-	(Not sure	? Skip this s	tep)	-			
ENGR1F	MATR1F	PHER1F	SCIR1F	SOSR1F				
ENGR2F	ESMR2S or IA	PR2S	PHER2F	SCIR2F	GEO	DR2F		
ENGC3S or EN	IGT3S or ENGL3S	ESMR3S or	APMR3S or	PCMR3S	PHER3F	HISR3F	One Grade 11	option
	Student w	ill need to regis	ster for any of	the above m	issing cred	its.		
		CC	MPULSORY	COURSES				
	All Grade 12 stude	•		_	•	•		
	Please put a che	eck mark besi	de the credit	s you will ne	eed to reg	ister for.		
Physical	Education*		PHER4F				1 credit	
English C	Comprehensive*		ENGC4S				1 credit	
All	Grade 12 students	must choose	one of the f	ollowing co	mpulsory	Math co	ourses:	
Essential	Skills Math*		ESMR4S				1 credit	
Applied I	Math*		APMR4S				1 credit	
Pre-Calci	ulus Math*		PCMR4S				1 credit	

ELECTIVES / OPTION COURSES

Please select five (5) courses and rank from 1 to 5. (One being the one you want most.)

Make sure to check the appropriate grade-level (Reminder 2 = Grade 10, 3 = Grade 11, and 4 = Grade 12).

Although there are no prerequisites, it is strongly recommended that students begin with the Grade 10 level, if not taken previously

nk	Although there are no prerequisites, it is strongly recommended that students begin with the Grade 10 level, if not taken previously. At least TWO (2) of your selections MUST be at the Grade 12 level!				
	2D Computer Animation / 3D Modeling	ANHR3S / MOHR3S (2 half courses = 1 course)	1 credit		
	Accounting	AESR3S, ASYR4S	1 credit		
	Art	VIAR2S, VIAR3S, VIAR4S	1 credit		
	Band++	MCBR2S, MCBR3S, MCBR4S	1 credit		
	Biology*	BIOR3S*, BIOR4S*	1 credit		
	Chemistry*	CHER3S*, CHER4S*	1 credit		
	Choir++	MCCR2S, MCCR3S, MCCR4S	1 credit		
	Current Topics in Science*	CTSR3S*	1 credit		
	Dance	DANR2S, DANR3S, DANR4S	1 credit		
	Desktop Publishing/Web Design	DPHR3S/WDHR3S (2 half courses = 1 course)	1 credit		
	Digital Images / Digital Film	DIHR2S / DFHR2S (2 half courses = 1 course)	1 credit		
	Drama	DAMR2S, DAMR3S, DAMR4S	1 credit		
	English Transactional*	ENGT4S	1 credit		
	English Literary*	ENGL4S	1 credit		
	Family Studies	FSTR2S, FSTR3S, FSTR4S	1 credit		
	Foods & Nutrition	FNUR2S, FNUR3S, FNUR4S	1 credit		
	French	FRER2F, FRER3S, FRER4S	1 credit		
	Global Issues	GLIR4S	1 credit		
	Graphic Arts	GRAR2G, GRAR3G, GRAR4S	1 credit		
	Human Ecology	HECR2S, HECR3S, HECR4S	1 credit		
	Law	LAWR4S	1 credit		
	Life Work Planning	LWPR2S, LWBR3S, LWTR4S	1 credit		
	Percussion (Drumming)	MU1R2S, MU1R3S, MU1R4S	1 credit		
	Personal Finance	PFNR2S	1 credit		
	Physics*	PHYR3S*, PHYR4S*	1 credit		
	Piano	MMKR2S, MMKR3S, MMKR4S	1 credit		
	Psychology	PSYR4S	1 credit		
	Reading is Thinking	RITR2S	1 credit		
	Textile Arts & Design	TADR2S, TADR3S, TADR4S	1 credit		
	Venture Development (Indigenous Entrepreneurship)	VDER3S, TTBR4S	1 credit		

Please Note ++:

These courses may be scheduled at 8:00 a.m., lunch time and / or 3:30 p.m.

Urban Fusion (DN1R2S, 3S, 4S) , Vocal Jazz (MVJR2S, 3S, 4S) and Drama Performance (DPHB1S, 2S, 3S, & 4S

 $^{-\}frac{1}{2}$ credit) will be <u>available</u> by <u>audition only</u> and you do not sign up for these at this time.



Entry Date:	
	Day / Month / Year

STUDENT APPLICATION FOR REGISTRATION & CONSENTS

School: GORDON BELL		STUDE	ENT #:	
GRADE: 12 ROOM: PROG	RAM CODE:	MET	#:	
RESIDENT: YES NO CATCHMENT:	YES NO	Move	- EFFECTIVE DATE: _	
STUDENT INFORMATION				
Legal Names: Last Name				
First Name Middle	Name	Name	e Known by	
Birthdate: Sex: Female	□ Male □	Country of Birth: Can	nada 🗖 <i>or</i>	
Preferred gender (choose one if applicable): Trans P	Person 🔲 Two-	Spirit 🗖 Gender n	on-conforming \Box	
Not a Canadian Citizen, please indicate:				
Date Entered Canada				
Permanent Resident Government Assisted Ro	-		_	
Languages spoken at home: English: Yes ☐ No				
Current or Last School Attended:		City/ Town/Fi		
STUDENT ADDRESS		a v		
Apt. No./Street No./Street				
Postal Code Home Phone		Unlisted St	tudent Lives on Ow	/n: Yes ⊔ No ⊔
PARENT/LEGAL GUARDIAN AND CONTACT INFORM	ATION			
Parent, Legal Guardian or Alternate Contact				
Last Name				
Relationship to Student		vith Yes 🛭 No 🗖 / Sti	udent Also Lives wi	ith Yes □ No □
Enter address and home phone if different from stu				
Address				
Home Phone□Unlisted	Work Phone	ext	Cell	
Email				
Parent, Legal Guardian or Alternate Contact	Employe	er		
Parent, Legal Guardian or Alternate Contact Last Name	Employe	First Name		
Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student	Employe	First Name		
Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Enter address and home phone if different from stu	Employe _ Student Lives v	First Name vith Yes □ No □ / Sto	udent Also Lives wi	ith Yes 🗆 No 🗀
Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Enter address and home phone if different from stu Address	Employe Student Lives v udent City	First Name vith Yes □ No □ / Sto	udent Also Lives wi Postal Code	ith Yes □ No □
Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Enter address and home phone if different from stu Address Home Phone	Employe Student Lives valuentCity Work Phone	First Name vith Yes □ No □ / Sto ext	udent Also Lives wi Postal Code	ith Yes □ No □
Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Enter address and home phone if different from students Address Home Phone Unlisted Email	Employe Student Lives v udent City	First Name vith Yes □ No □ / Sto ext	udent Also Lives wi Postal Code	ith Yes □ No □
Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Enter address and home phone if different from stu Address Home Phone	Employe Student Lives valuentCity Work Phone	First Name vith Yes □ No □ / Sto ext	udent Also Lives wi Postal Code	ith Yes □ No □
Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Enter address and home phone if different from students Address Home Phone Unlisted Email	Employe Student Lives v udent City Work Phone Employe	First Name vith Yes	udent Also Lives wi Postal Code Cell	ith Yes □ No □
Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Enter address and home phone if different from student Address Home Phone Dunlisted Email Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Relationship to Student	Employed Student Lives voludent City Work Phone Employed Student Lives v	First Name vith Yes □ No □ / Stuexter	udent Also Lives wi Postal Code Cell	ith Yes □ No □
Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Enter address and home phone if different from state Address Home Phone Dunlisted Email Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Enter address and home phone if different from state Enter address and home phone if different from state Enter address and home phone if different from state Parent, Legal Guardian or Alternate Contact Enter address and home phone if different from state Enter address and	Employed Student Lives voludent City Work Phone Employed Student Lives voludent	First Name vith Yes	udent Also Lives wiPostal Code Cell udent Also Lives wi	ith Yes
Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Enter address and home phone if different from stu Address Home Phone	EmployedStudent Lives voludent City Work Phone Employed Student Lives voludent	First Name vith Yes	udent Also Lives wiPostal Code Cell udent Also Lives wi	ith Yes No
Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Enter address and home phone if different from state Address Home Phone Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Enter address and home phone if different from state Address Home Phone Unlisted	EmployedStudent Lives voludentEmployedEmployedStudent Lives voludentCityWork Phone	First Name vith Yes	udent Also Lives wiPostal Code Cell udent Also Lives wiPostal Code Cell	ith Yes No ith Yes No I
Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Enter address and home phone if different from stu Address Home Phone	EmployedStudent Lives voludentEmployedEmployedStudent Lives voludentCityWork Phone	First Name vith Yes	udent Also Lives wiPostal Code Cell udent Also Lives wiPostal Code Cell	ith Yes No ith Yes No I
Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Enter address and home phone if different from state Address Home Phone Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Enter address and home phone if different from state Address Home Phone Unlisted	EmployedStudent Lives volumentEmployedStudent Lives volumentEtty	First Name vith Yes	udent Also Lives wiPostal Code Cell udent Also Lives wiPostal Code Cell	ith Yes No ith Yes No I
Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Enter address and home phone if different from student Address Home Phone Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Enter address and home phone if different from student Enter address and home phone if different from student Enter address Home Phone Unlisted Email LEGAL CUSTODY Please provide documentation as necess Joint* Mother Father	EmployedStudent Lives voludentEmployedStudent Lives voludentCity Work PhoneEmployed StudentCity	First Name vith Yes No	udent Also Lives wiPostal Code Cell udent Also Lives wiPostal Code Cell	ith Yes No ith Yes No I
Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Enter address and home phone if different from state Address Home Phone Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Enter address and home phone if different from state Address Home Phone Unlisted Enter address and home phone if different from state Address Home Phone Dunlisted Email LEGAL CUSTODY Please provide documentation as necess Joint* Mother Father *Joint Custody is when those parents have a legal	EmployedStudent Lives voludentEmployedStudent Lives voludentCity Work PhoneEmployed StudentCity	First Name vith Yes No	udent Also Lives wiPostal Code Cell udent Also Lives wiPostal Code Cell	ith Yes No ith Yes No I
Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Enter address and home phone if different from state Address Home Phone Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Enter address and home phone if different from state Address Home Phone Unlisted Enter address and home phone if different from state Address Home Phone Dunlisted Email LEGAL CUSTODY Please provide documentation as necess Joint* Mother Father State *Joint Custody is when those parents have a legal	Employed Student Lives voludent City Work Phone Employed Student Lives voludent City Work Phone Employed Essary Guardian lal custody agreement	First Name vith Yes ☐ No ☐ / Stuext er First Name vith Yes ☐ No ☐ / Stuext erext in place for the student	udent Also Lives wiPostal Code Cell udent Also Lives wiPostal Code Cell Other □	ith Yes No ith Yes No I
Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Enter address and home phone if different from state Address Home Phone Parent, Legal Guardian or Alternate Contact Last Name Relationship to Student Enter address and home phone if different from state Address Home Phone Unlisted Enter address and home phone if different from state Address Home Phone Dunlisted Email LEGAL CUSTODY Please provide documentation as necess Joint* Mother Father *Joint Custody is when those parents have a legal	EmployedStudent Lives voludentEmployedStudent Lives voludentCity Work PhoneEmployed StudentCity	First Name vith Yes ☐ No ☐ / Stuext er First Name vith Yes ☐ No ☐ / Stuext eraxt eraxt er SexSchool	udent Also Lives wiPostal Code Cell udent Also Lives wiPostal Code Cell Other	ith Yes No

Additional Contact Information					
Emergency Contact (if parent/guardia	n cannot be reached)				
Last Name		First Nam	ne		
Relationship to Student			ives with Yes \Box	l No□	
Home Phone	Unlisted	Work Phone	ext	Cell	
Day Care					
Name			Phone _		
Address			Winnipeg, MB	Postal Code	
Medical Information					
MB (9 digit) Personal Health ID No:					
Health Concerns/Allergies:					
Additional Health Concerns	Please indicate (✓) all health care nee	eds that apply to	o your child:	
☐ Asthma: (administr☐ Bleeding Disorder☐ Cardiac Condition☐ Clean Intermittent ☐ Diabetes: Type 1 or☐ Gastrostomy Feedin☐ Osteogenesis Imper☐ Ostomy Care☐ Pre-set Oxygen☐ Seizure Disorder☐ Steroid Dependent☐ Suctioning (oral and☐ My child is receivin☐ My child does not have a If you have checked any of the above healt The URIS application will then be submitte be provided and an individual health care is	Catheterization Type 2 ng Care rfecta (brittle bone d Condition d/or nasal) g Winnipeg School ny of the above list th care needs, the scho d to the Winnipeg Regi	Division transportat ted health care conce ol will provide you with a onal Health Association (ion to and from erns. Unified Referral ar	school. nd Intake System (URIS) A	
Application for the Use of the Onli	ne Information Re	esources in the Winn	ineg School Div	rision	
To the Student: I understand and a technology (Division/personal devinetworks. To student 16 years and To the Parent: As the parent/guar set out by The Winnipeg School Divaccess to all technologies and Divisional I consent to allowing my I do not consent to allow Ancestral / Cultural Identification Providing this personal ancestral/cultural is the student's ancestral or consent to allow.	abide by the Division ces) and social med of the student vision policies and a cion approved social child to have accessing my child to have and Languages Deput provides and Languages an	on Policies, and applications including applications including applications including applicable legislation along the work of	cable legislation ding use of the access is designed. I hereby give pointing the school and social medical continue on netional.	n for the responsible Winnipeg School Dived for educational pupermission to my child Division. Judical Media Ext page)	rision urposes as Id to have
windt is the student's diffested of (Luiturar identity, (fo	n exumple, Chirlese, SWaz	a, rilipino, etc.):		
SIGNATURE OF PARENT/GUARDIAN C	DR ADULT STUDENT:			DATE:	



Aboriginal Identity Declaration EIS Data Collection

Aboriginal Identity Declaration helps to support the efforts of Manitoba Education and Training and school divisions to plan and improve programs in a way that is responsive to Aboriginal learners.

(Providing this personal information is voluntary and optional. It is being collected in compliance with section 36(1)(b) of The Freedom of Information and Protection of Privacy Act as it is necessary for and relates directly to the activity of Manitoba and school divisions to plan, deliver and improve programs.)

Stu	ent Name:
1.	, (name of parent/guardian, please print clearly): ☐ Am submitting my child's Aboriginal Identity Declaration for the first time. ☐ Am making changes to my child's Aboriginal Identity Declaration ☐ Already submitted my child's Aboriginal Identity Declaration and have no further changes to make at this time.
2.	Is your child an Aboriginal person, that is, First Nation (North American Indian), Métis, or Inuk (Inuit)? Note: First Nations (North American Indian) include Status and Non-Status Indians If "Yes", mark the square(s) that best describe(s) your child now: Yes, First Nation (North American Indian) Yes, Métis Yes, Inuk (Inuit)
3.	Which best describes your child's Aboriginal cultural-linguistic identity? Please select up to two choices: Anishinaabe (Ojibway/Saulteaux) Dene (Sayisi) Oji-Cree Inuktitut Ininiw Dakota Michif Other – please specify:
Par	nt/Guardian Signature Date

Informed Consent-Students

Attention Parents/Guardians/Adult Students: Please complete and return this form to the school as soon as possible. This

information will be kept on file for reference throughout the school year. Student Name: School: ___ 1. Publish or Display Student Work Our school would like to share information and communicate with parents/guardians by highlighting the school, students and student work or activities in a variety of publications and/or Division organized or sponsored event. The following are examples only and not meant to be an inclusive list of how student information and work may be published or shown: students and their displays during school sponsored open houses, professional development sessions; students in other school related activities held at the school, school division sites or at school or school division sponsored division publications, or school publications, which are posted to the school or Winnipeg School Division controlled website; or posting or publishing on the school or Winnipeg School Division controlled social media platforms. Please note: Video and photographs of students posted to the school or Winnipeg School Division controlled websites and Winnipeg School Division controlled social media platforms may identify students by name. Please indicate your choice below: LI GIVE CONSENT to the Winnipeg School Division to publish or show my child's, or my (as an adult student) photographs, name, grade, school and samples of my or my child's work in various publications, at a Winnipeg School Division organized or sponsored events, and/or on Winnipeg School Division websites and social media platforms. I understand that photographs of students posted to the school or Winnipeg School Division controlled websites and social media platforms may identify students by name. L I DO NOT GIVE CONSENT to the Winnipeg School Division to publish or show my child's, or my (as an adult student) photographs, name, grade, school and samples of my or my child's work in various publications and/or Division organized or sponsored events. 2. Media Many positive things take place in our schools and we would like to share this good news with the broader community by inviting journalists and other members of the media to visit our schools. Photographs, videotaping or interviews are allowed at schools only with the permission of the principal or vice-principal. Please indicate your choice below. I CONSENT to my son/daughter (or myself as an adult student) being photographed, videotaped/recorded or interviewed by the media. LIDO NOT CONSENT to my son/daughter (or myself as an adult student) being photographed, videotaped/recorded or interviewed by the media. 3. Emails The electronic distribution of newsletters, school updates and announcements regarding division and school activities, including fundraising and promotions. LI CONSENT to receive information in the form of newsletters, school updates and announcements regarding division and school activities, including fundraising and promotions. ☐ I DO NOT CONSENT to receive information in the form of newsletters, school updates and announcements regarding division and school activities, including fundraising and promotions. Parent/Guardian or Adult name (please print): _____ Date: __ Signature of Parent/Guardian or Adult Student: Please note: Should circumstances change during the school year, you may change your consent at any time by contacting the school principal in writing.

WINNIPEG SCHOOL DIVISION LIVE STREAMING STUDENT PERMISSION FORM

In the Winnipeg School Division, Live Streaming refers to the broadcasting of live lessons in real time where students are present in the classroom as well as students learning from home.

Through this model teachers will be providing live streaming experiences both in real time or through a recording, which may be posted on the learning platform for other students to view.

Due to the special nature of live streaming activities, parents/guardians must consent to their child being photographed, videotaped, or recorded as part of the classroom learning activities. During live streaming lessons the webcam in your home should be positioned in such a way that it only captures your child's image when they are participating in the live streaming lesson.

I give my child permission, during this school year, to participate in live streaming activities on platforms such as Seesaw, Google Suite/Meets, and Microsoft Office 365/Teams to address curricular outcomes. In addition, I give permission for my child's voice and image to be transmitted and viewed for the purpose of learning activities in the classroom and home environment.

I do not give my child permission, during this school year, to participate in live streaming activities .

Student Name		
	(please print clearly)	
Parent or Guardian	(please print clearly)	
Parent or Guardian Signature		
Date		