

# WELLAND CENTENNIAL SECONDARY SCHOOL

240 Thorold Rd. W., Welland, ON. ~ L3C 3W2 ~ (905) 735-0700

## Grade 9 Intention Sheet 2022-2023



**This form must be completed in Acrobat Reader NOT your browser.**

*Please read each section of the form before submitting the form.*

### Destreamed Courses

<b>English</b>	All students entering grade 9 within the District School Board of Niagara will be enrolled into a destreamed grade 9 program.
<b>Mathematics</b>	
<b>Science</b>	
<b>Geography</b>	Each student will study compulsory courses at the same level as each grade 9 student in the school board.
<b>French</b>	

Each student must participate in Health and Physical Education in grade 9. Please select the appropriate phys. ed class. **Male** **Female**

Should your child choose to complete a summer phys. ed. course and would like to take a 3rd. elective in the fall, please contact the school in May to adjust their course selections.

### FRENCH IMMERSION

Students selecting the French Immersion program must be currently enrolled in a French Immersion program or enrolled in a publicly funded, French language school.

Is your child enrolling in the French Immersion program at Welland Centennial? **Yes** **No**

**Students are required to select (1) Arts elective as their first elective course and a second elective of their choice.**

*(French Immersion students are strongly encouraged to select Art Visuel (Français), as it will satisfy both the Arts requirement and also a French Immersion requirement.)*

**Select an Arts elective from the list below:**

Dance  
Drama  
Music - Instrumental  
Music - Vocals  
Visual Arts  
Arts Visuel - (French Immersion Students Only)

**Select an additional elective from the list below:**

Dance  
Drama  
Music - Instrumental  
Music - Vocals  
Visual Arts  
Arts Visuel - (French Immersion Students Only)  
Business: Computer Applications  
Integrated Technology  
Exploring Hospitality and Tourism (Foods)

Student's Legal Surname

Student's Legal First Name:

Student's Preferred Name (First and Last)

Date of Birth (mm/dd/yyyy)

Elementary School:

O.E.N.#: Can be found on report card

Parent /Guardian Name

Home Phone #

Cell Phone #

Parent / Guardian Email Address

**Home Address:**

No.

Street Name

Unit #

City

Postal Code

Once you have completed the form click the **SUBMIT** button. Your email application will open and the form will be added as an attachment. It is prepared to be sent to the correct email address. Click **SEND** on your email application. Should you have any difficulty, you may also save the completed file and email it to **wcsscougars@gmail.com**. Once submitted You will receive a confirmation email. Contact the WCSS guidance office if you require assistance at: (905) 735-0700.

