



LRSD Pursuits Summer School

Student Registration Form - 2023

LRSD student

Student Information

Student's Legal Last Name: _____ Student's Legal First Name: _____ Student's Legal Middle Name: _____

Student's Preferred Last Name (if applicable): _____ Student's Preferred First Name (if applicable): _____ Student's Preferred Middle Name (if applicable): _____

Gender Male
 Female
 X (unspecified)

Birthdate: (mm/dd/yy) _____

Home Phone Number _____

Street Address or Legal Land Description Mailing Address Town/City, Province and Postal Code

¼ sec, Twp, Rge, W of, Lot, Block

Student Home School _____ Student Preferred Contact Number _____

Student LRSD email _____ Parent email _____

Course selection – Students can enroll in one core course and one option course

(5 credit CORE courses)	English 10-1		Social Studies 10-1	Math 10C
	English 10-2	Science 10	Social Studies 10-2	Math 10-3
	English 20-1	Science 14	Social Studies 20-1	Math 20-1
	English 20-2	Science 24	Social Studies 20-2	Math 20-2
	English 30-1		Social Studies 30-1	Math 20-2
	English 30-2		Social Studies 30-2	Math 20-3

Physical Education 10 (3 credits)
 CALM - Career & Life Management (3 credits)
 Workplace Safety (1 credit)

Student to answer the following:

1. Students are expected to commit 1 hour of time for every credit per day. (eg. 5 credit course = 5 hours per day). List the amount of time per day you are able to commit to your learning: _____
2. Please list any other obligations that may interfere with your ability to complete the course (eg. summer job, camp, vacation, etc.)

3. Are you taking this course(s) for credit recovery? Yes No If Yes, please list your Teacher's name _____

Please take this form to your school principal to have them approve your application. Principal signature _____

Parents: Please read carefully, check boxes and sign to complete registration
 I understand the course(s) my child is enrolling in must be completed by July 28, 2023.
 understand that my child is expected to spend 4-5 hours per day for each 5 credit course.

Parent Signature: _____ Date: (mm/dd/yy) _____

**** (signed form must be emailed to: summerschool@lrzd.ab.ca) ****

