

Byrne Creek Community School GRADE 8 COURSE SELECTION FORM 2024 - 2025

Please return completed form by February 27, 2024

Charles Information		
Student Information Legal Last Name	Legal First Name	
Legal Last Name	Legal I ist Name	
Preferred Last Name	Preferred First Name	
Birthdate (yyyy-mm-dd)	MyEdBC Student #	
Address (Apartment # + House # + Street Name + City + Postal Code)		
Home Phone	Email	
Elementary School Information		
School Name	Grade 7 Teacher Name	
Course Selection		
Required Courses (7 courses)	Elective Course (1 course)	
The following courses are required for all students:	Students must <u>select one</u> of the following electives:	
1. English Language Arts 8	☐ Arts Education 8	
2. Social Studies 8	☐ Drama 8	
3. Physical & Health Education 8	☐ Dance Performance 8	
4. Mathematics 8	☐ Music - Beginner Band 8 (no band experience, year-long)	
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5. Science 8	☐ Music - Concert Band 8 (previous band experience, year-long)	
6. French 8		
7. ADST 8 (alternating days of Food & Textile Studies and Technology)		
Apply for Specialty Programs		
Off-Timetable Courses		
☐ Music - Choir 8 (year-long, after school)		
☐ Music - Jazz Band 8 (only available for students who select Concert Band 8 as their elective course, year-long, before school)		
STEAM Program		
☐ STEAM Program - a completed STEAM Program application form must be attached		
Tanahay Usa Ouly		
Teacher Use Only		
ELL Program - For students requiring English Language Learning instruction: the number of classes needed will be		
determined in consultation with your child's Grade 7 teacher and the Learning Support Services Department at Byrne.		
☐ ELL Program		
Learning Support Services - For students requiring learning support (ACCESS, Pre-Employment) placement will be		
determined in consultation with your child's Grade 7 teacher and the Learning Support Services Department at Byrne.		
☐ LSS Course Support ☐ ACCESS Program ☐ Pre-Employment Program		
Signature		
Parent Signature	Date	
Student Signature	Grade 7 Teacher Signature	



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Parent/Guardian Information		
Relationship to Student		
☐ Mother ☐ Father ☐ Legal Guardian ☐ Other - specify relationship:		
Last Name	First Name	
Address if different from student's address (Apartment # + House # + Street Name + City + Postal Code)		
Home Phone	Cell Phone	
Work Phone	Email	
Parent/Guardian Information Relationship to Student		
☐ Mother ☐ Father ☐ Legal Guardian ☐ Other - sp	First Name	
Lost Wallie	THIST NAME	
Address if different from student's address (Apartment # + House # + Street Name + City + Postal Code)		
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Home Phone	Cell Phone	
nome ritale	Cell Phone	
Work Phone	Email	
WORK PHOTIE	Email	
Contact Information - EMERGENCY CONTACT		
Last Name	First Name	
Home Phone	Cell Phone	
Work Phone	Relationship to Student	
Medical Information		
Doctor's Name	Special Medical Concerns	
	□ No	
Doctor's Phone	☐ Yes - describe the student's medical conditions:	
Student's BC Personal Health Number		
Additional Demographic Information	Language Speken at Home	
First Nations / Métis Ancestry	Language Spoken at Home	
□ No □ Yes		
Student's citizenship status in Canada		
☐ Canadian citizen ☐ Permanent Resident ☐ Refugee		
☐ Study permit - International Education Program ☐ Study permit - parent is on a work/study permit List all <u>siblings</u> currently attending Byrne Creek Community School (last name + first name)		
List all <u>siblings</u> currently attending byrne Creek Community School (last name + first name)		