



HOLY CROSS CATHOLIC SECONDARY SCHOOL

1355 Lansdowne St. West, Peterborough, ON K9J 7M3

Phone: 705-748-6664 / Fax: 705-742-1498

Website: www.hccss.ca



GRADE 10-12 REGISTRATION CHECKLIST

Student's Name _____ Current / Previous School _____ Grade Applying For _____

O.S.S.L.T. Successfully Completed Yes No Hours of Community Service Completed: _____

***Please follow the checklist below to make sure all necessary items have been submitted and signed.**

MANDATORY PAPERWORK TO RETURN	INSTRUCTIONS	
<input type="checkbox"/> REGISTRATION FORM	- Complete all sections of the form and return to Holy Cross	
<input type="checkbox"/> SCHOOL HISTORY FORM	- To be completed by Vice Principal at current school	
<input type="checkbox"/> COURSE SELECTION FORM	- Parent and student must sign form	
<input type="checkbox"/> PRESENT TIMETABLE	- If registering during a school year	
<input type="checkbox"/> COPY OF MOST RECENT REPORT CARD		
<input type="checkbox"/> OFFICIAL TRANSCRIPT	- To be obtained from current school	
<input type="checkbox"/> ATTENDANCE PROFILE	- To be obtained from current school	
<input type="checkbox"/> COPY OF BIRTH CERTIFICATE	- Baptismal certificate or passport will be acceptable	
<input type="checkbox"/> IMMUNIZATION RECORD	- Copy to be submitted.	
OTHER PAPERWORK THAT MAY NEED SUBMITTING	(IF APPLICABLE)	
<input type="checkbox"/> INDIVIDUAL EDUCATION PLAN (I.E.P.) / IDENTIFICATION INFORMATION	- To be completed by Special Education Teacher at previous school and attach latest copy of I.E.P.	
<input type="checkbox"/> EMERGENCY RESPONSE PROCEDURE FOR MEDICAL CONDITIONS FORM	- Doctor must sign form before submitting	
EXTRA ITEMS FOR YOUR OWN INFORMATION		
* \$20.00 Student Activity Fee will be due once the student starts (on-line payment)		
* Course Calendar is available for viewing @ www.hccss.ca on the Admission and Registration page		
* STSCO- Bussing information * R.J. McCarthy Uniform Guide		
<p>As a student wishing to enroll at Holy Cross, please note it is the responsibility of the student/family to fully complete the registration package and provide us with the information requested above. This information should be obtained from your current/previous school.</p> <p>By signing below, I authorize the Administration of Holy Cross C.S.S. to contact the Administration of the above listed school. This is important and necessary for the registration package to be complete.</p>		
Student Signature _____	Parent/ Guardian Signature _____	Date _____
<i>For Administration Use Only</i>		Date Package Submitted to Guidance: _____
Student has been granted approval YES <input type="checkbox"/> NO <input type="checkbox"/>		Date: _____
		Signature: Principal/ Vice Principal _____
Entered On Maplewood: _____		Timetable Created: _____