



Delta Academy Inc.

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Website: <http://deltaacademytoronto.com/>

SECONDARY CREDIT COURSES

STUDENT INFORMATION FORM

1. PERSONAL INFORMATION (Please PRINT clearly)

SURNAME

FIRST NAME

ADDRESS

CITY / PROVINCE

POSTAL CODE

HOME PHONE NUMBER

DATE OF BIRTH (YYYY-MM-DD)

ONTARIO EDUCATION NUMBER (OEN)

GRADE

EMERGENCY CONTACT

EMERGENCY PHONE NUMBER

E-MAIL ADDRESS

2. COURSE INFORMATION

NEW CREDIT COURSES

COURSE NAME

COURSE CODE

PREREQUISITE

FINAL MARK

COURSE NAME

COURSE CODE

PREREQUISITE

FINAL MARK

UPGRADING COURSE(S)

COURSE NAME

COURSE CODE

FINAL MARK

COURSE NAME

COURSE CODE

FINAL MARK

3. DAY SCHOOL INFORMATION & APPROVAL

CURRENT DAY SCHOOL

DAY SCHOOL ADDRESS

SIGNATURE OF PRINCIPAL/DESIGNATE

SIGNATURE OF PARENT/GUARDIAN

STUDENT SIGNATURE

DATE