

REGISTRATION FORM

Skills for Success

Lifestyle Management credit course, for students with a diagnosis of a Specific Learning Disability and / or ADHD.

Fax or mail completed registration form by June 26, 2009, to:

Becky Van Dyke

Fax: 705-722-5179

Mail: One Georgian Drive, Barrie, ON Canada L4M 3X9

NAME: _____

TELEPHONE: _____

ADDRESS: _____

POSTAL CODE: _____

CITY: _____

DATE OF BIRTH: _____

E MAIL: _____

PROGRAM: _____

STUDENT #: _____

Would you like to stay in the residence (free with tuition)? **Yes** **No**

In June 2009, I will be graduating from: _____ **Secondary School**

Please include copies of documentation confirming a diagnosis of a Specific Learning Disability and / or ADHD.

Documentation Included:

Psycho-educational Assessment

Individual Education Plan (IEP)

Upon receipt of this registration an appointment with a Disability Specialist will be arranged, at which time original documentation and High School transcript will be required.