

Avon Maitland District eLearning Centre

165 Princess St. E., P.O.Box 729, Clinton, ON N0M 1L0 Phone: 519-482-5428 Fax: 519-482-8795



## Course Add/Drop Form

Please complete all areas of this form, writing neatly and legibly. Once form is complete, please fax to AMDEC at 519-482-8795, or scan completed form and e-mail to the AMDEC Office (amdec.office@ed.amdsb.ca).

Student Name:

Date:

Date of Birth (dd/mm/yyyy):

OEN:

Name of home school (holding your OSR):

Course(s) to <u>ADD</u> :	Course(s) to <b><u>REMOVE</u></b> :
1	1.
2	2.
3	3.
4	4.
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Reasons for course change(s):

Please obtain <u>ALL</u> of the required signatures. Your course change will be processed only when relevant signatures are complete.

Student Signature	Date
Students under the age of 18 must have this section completed. I approve of the course change(s) indicated above	
Parent/Guardian Signature	Date
Signature of Principal (or designate) at enrolling school. • If this tin school board will pay the fee per course (as identified by the District School Board. The AMDSB will send an invoice to	e Ministry of Education) to the Avon Maitland the student's enrolling school board (applies to out
of-board students registered through publicly-funded school I have reviewed the requested course change(s) with this st	