## Student Agreement for Placement in an Alternative Education Program



Name:	Date of Birth:
School:	Grade:
I have discussed and fully understand the following:	
<ul> <li>Program goals and content</li> <li>Differences between Regular Education and a implications for career and post-secondary of An Alternative Education program will not m standing</li> <li>Methods of program delivery</li> <li>Reason for recommending the program</li> </ul>	l an Alternative Education Grade 12 Transcript and hoices
I,	
Signature of Student	Date
Student passed on signing waiver Yes	
Principal	Date
Note: This agreement form should be completed each	ch year the student is in an Alternative Education

Program.

## Parental/Guardian Agreement for Student Placement in Alternative Education Program



Student:	Date of Birth:
School:	Grade:
and educational personnel, it is the recomm	nt and consultation with parent(s)/guardian(s), teachers, endation of the educational team that your child be placed ped below (include grade level and specific course(s) 18, 28,
	early understand the recommendation and hereby give
rationale, benefits and the implications of th	gram placement described above. I understand the is placement and realize that my child:
<ul> <li>Will not meet the current admission</li> <li>May be impacted in employment op</li> <li>Will not meet the requirements for a</li> <li>May discontinue the Alternative Edu</li> </ul>	•
Signature of Parent or Guardian	Date
Signature of Parent or Guardian	Date
Parent/Guardian passed on signing waiver	Yes
Principal	Date

Note: Each school year the student is in an Alternative Education Program, this form must be completed and filed in the cumulative file.