Durham District School Board
400 Taunton Road East, Whitby, Ontario L1R 2K6
Phone: 905-666-5500; Toll Free: 1-800-265-3968

PERMISSION TO ENROL A RESIDENT INTERNAL STUDENT – SECONDARY

Type of request

☐ This is a NEW REQUEST ☐ This is a RENEWAL ☐ Number of years at current school

RECEIVING SCHOOL

Name of Receiving School Applying to Attend: _____

Principal of Receiving School: _____

I hereby apply for the following student (name): _____

to attend the above named school as an out of area student as of (date): _____

for the following reasons (Attach letter if more space is required).

HOME SCHOOL (the home school is defined as the school designated for student attendance by the DDSB based on student address and school boundary).

Name of Home School: _____

Principal of Home School: _____

Student's Name: _____

Student's Date of Birth: _____

Parent/Guardian Name: _____

Home Address: _____

Telephone Number: _____

Parent/Guardian Email: _____

Present Grade: _____

Grade Applying for at Receiving School: _____

_____ _____
Parent/Guardian Signature Date

_____ _____
Student's Signature (if over 18) Date

_____ _____
Home School Principal's Signature Date

Permission is granted, subject to the following conditions:

- That there is space in the receiving school to accommodate the student. Students may be required to return to their home school at the end of the first week of classes due to insufficient room
- That transportation arrangements are the responsibility of the parent/guardian
- That this authorization expires at the END OF THE CURRENT SCHOOL YEAR and application for renewal must be made by the parent/guardian to the school Principal for the following year by March 15th
- If approved, students must give up LOSSA eligibility to play sports for one year, pending appeal to LOSSA (Grade 8 to 9 requests excluded).

RECOMMENDATION

SPECIAL CONDITIONS FOR RECOMMENDATION OR REASONS FOR NOT RECOMMENDING

☐ Recommended by Receiving School
☐ Approved by Superintendent of Education/Area Education Officer
☐ Not Recommended by Receiving School (reason for not recommending given above)
☐ Not Approved by Superintendent of Education/Area Education Officer

Signature of Administrator (Receiving School): _____

Signature of Superintendent of Education/Area Education Officer: _____

Cc: Parent, Receiving School Principal, Home School Principal, Superintendent(s)

ADMINISTRATIVE / GUIDANCE DEPARTMENT INTERVIEW AT RECEIVING SCHOOL

Date of Interview: _____

We can provide this student with the courses requested.	Yes ☐	No ☐
We have room in these classes to accommodate this student.	Yes ☐	No ☐
Appropriate documentation has been provided.	Yes ☐	No ☐
There has been communication between the home school and the receiving school.	Yes ☐	No ☐

NOTES:

_____ _____

Date

Signature: Administrator/ Guidance
Head of Receiving School

Please Note: L.O.S.S.A. Athletic Eligibility - When students move to another school, they give up their L.O.S.S.A. eligibility to play sports for one year, pending appeal to L.O.S.S.A.