

**KAWARTHA PINE RIDGE DISTRICT SCHOOL BOARD  
SUMMER SCHOOL 2026**

**Monday, June 29 – Monday, July 27, 2026**

Please place a  
checkmark ✓  
beside the desired  
site location

**Bowmanville High School**  
49 Liberty St N., Bowmanville L1C 2L8

**Cobourg Collegiate Institute**  
335 King Street East., Cobourg K9A 1M2

**Thomas A. Stewart Secondary School**  
1009 Armour Rd., N Peterborough K9H 7H2

**Course Selection:**

1. \_\_\_\_\_

2. \_\_\_\_\_

Entered \_\_\_\_\_

**Please attach a grad  
summary to each  
registration (available at  
your student's school)**

Students Current School:

\_\_\_\_\_  
\_\_\_\_\_

**GRADE 9 – 12 REGISTRATION FORM - CREDIT PROGRAM**  
**PLEASE FULLY COMPLETE THIS REGISTRATION FORM & RETURN IT TO YOUR HOME SCHOOL**

(PLEASE PRINT) Legal Last Name \_\_\_\_\_ Legal First Name \_\_\_\_\_ Initial \_\_\_\_\_

(PLEASE PRINT) Preferred Last Name (if applicable) \_\_\_\_\_ Preferred First Name (if applicable) \_\_\_\_\_

OEN # \_\_\_\_\_ (Mandatory) Current Grade: \_\_\_\_\_

Date of Birth: (D/M/Y) \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_  
(Number & Street or R. R #) (Main)

(City/Town) \_\_\_\_\_ (Postal Code) \_\_\_\_\_

If your student  
has an IEP,  
medical plan of  
care or positive  
behaviour  
support plan  
please make sure  
to include a copy  
of these  
documents with  
this registration.

**PARENT/GUARDIAN INFORMATION:**

Name: \_\_\_\_\_ Daytime Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ E Mail: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

Health Concerns: \_\_\_\_\_

**PLEASE NOTE THE FOLLOWING:**

**Attendance:** A student will be removed from, and fail to receive an evaluation for any course in which they have been absent for two (2) days (CHV/GLC or upgrade courses – 1 day absence)

**Lates:** If a student is late four (4) times it will count as one (1) day of absence.

**Culminating Activity:** Course culminating activities will be completed in all subjects.

**Courses: Students can register to take one full credit in-person, co-op, dual credit, or eLearning course or two half credit (GLC/CHV courses) or credit recovery courses per summer.**

Signature of Student \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_

**NOTE:** All summer school credits are granted subject to confirmation of eligibility by the home school. Students are advised to ensure that all admission requirements have been met prior to their enrolment in a course.

The above student is eligible for the course(s) indicated: \_\_\_\_\_

Signature of home school Principal or Guidance Counsellor

**All Summer School Registration Forms should be sent to:**  
**Bowmanville High School, Attention: Jill Curzon - Summer School 49 Liberty St., N., Bowmanville, ON L1C 2L8**  
**Phone: 905-623-4416 x205 or email – [summer\\_school@kprdsb.ca](mailto:summer_school@kprdsb.ca)**