BRITISH COLUMBIA
The Best Place on Earth

Ministry of Education
STUDENT REGISTRATION AND FIRST SUBMISSION OF GRADES

STUDENT IDENTIFICATION INFORMATION

School Code	School Name	Personal Education Number	Local Student Number
		| | | | | | | | | |	

Family Name (legal)	First Name (legal)	Middle Name (legal)

Gender	Date of Birth (YYYY/MM/DD)	Present Grade	Citizenship (Please do not leave blank)
☐ M ☐ F	| | | | | | | |	☐ 12 ☐ 11 ☐ 10 ☐ AD ☐ AN	☐ Canadian or Permanent Resident ☐ Other

Permanent Mailing Address (street and/or PO Box)	City	Province	Postal Code
		☐ BC ☐ AB ☐ YT Other☐☐	

Country (if not Canada)	Career Pgm Code	Graduation Requirements (choose a program)
	|	☐ **2004** 80 credit ☐ **1995** 52 credit ☐ **1950** Adult ☐ School Completion Certificate

Examinable Courses

COURSE CODE	GRAD REQT TYPE	COURSE TYPE	SESSION DATE YY	SESSION DATE MM	FINAL % OR INDICATOR	CREDITS

Non-examinable courses

COURSE CODE	GRAD REQT TYPE	COURSE TYPE	SESSION DATE YY	SESSION DATE MM	FINAL % OR INDICATOR	CREDITS

Do not include completed examinable courses. Please use the Transcripts and Examinations Change Form to report Independent Directed Studies (IDS) courses.
PHOTOCOPY the completed form for your files and RETURN the ORIGINAL to: MINISTRY OF EDUCATION, PO BOX 9886 STN PROV GOVT VICTORIA BC V8W 9T6
FAX NUMBER 250 356 9460