



St. Michael Catholic Secondary School

9130 Columbia Way, Bolton, ON L7E 4G6

905-951-8935

Registration for Year 5

Student Name: _____

Student Cell: _____

Return for: Semester 1 ____ Semester 2 ____ Full Year ____

Reasons for Returning in Year 5:

- Complete requirements for graduation.
- Need more than one pre-requisite for post-secondary studies.
- Improve more than one mark for post-secondary studies.
- Do a co-op placement.
- Other _____

If you are not accepted to come back to St. Michael for year 5, what is your plan?

Exit strategy after 5th year:

- Apprenticeship
- College
- Other
- University
- Work

What courses are you requesting?

Student Signature: _____