## RETURNING STUDENT CONTRACT The following students must complete this contract: (check any that apply)

	I Students returning for a 5 <sup>th</sup> year of second students who are 18 years of age or older	•	
Please complete this f	orm as accurately as possible:		
Name:	Homeroom:		
Date of Contract:	 Day/Month/Year	•	Day/Month/Year
<ul> <li>□ Need Compuls</li> <li>□ Need to Compl</li> <li>□ Need to Compl</li> <li>□ Need Credits fo</li> <li>□ Need to Upgrad</li> <li>□ Not ready to at</li> </ul>	g: (Please check all that apply) ory Credits How many? ete Community Hours ete OSSLT (Ontario Secondary School or Post-Secondary Destination de Marks tend college or university or work for ed on a post-secondary destination	/Literacy Test) ull-time	
Diploma Status: (Ple  ☐ Will earn OSSE  ☐ Already have C	by end of June		
•	all of my scheduled classes. I und awn from the register of USS at the		•
•	time for every class. I understand thdrawn from the register of USS a		•
that if I act inappropria	(as defined in the Code of Conducted or disrespectfully on a regular on of the Administration.	, ,	

This form must be returned to Ms. Allen in Guidance before any courses will be submitted for you.

Vice-Principal Signature:

Principal Signature:

Student Signature: \_\_\_\_\_