



Application for the Enhanced Learning Programme Leading to the IB Diploma Programme



Korah Collegiate & Vocational School
IB World School – Algoma District School Board
(705) 945-7180
www.korahcvs.com
www.ibo.org

Application Package for: NON-ADSB STUDENTS
Deadline to apply is December 20th, 2024

Please return this completed application package to:
Korah Collegiate c/o Student Services
or
Email johnstk@adsb.on.ca

STUDENT INFORMATION

Last name: _____ First name: _____ M ☐ F ☐

Address:

<i>Number and Street</i>	<i>City</i>	<i>Province</i>	<i>Postal Code</i>
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Student cell # (if applicable):

Date of birth:

() _____

(YYYY/MM/DD)

Current School:

Assigned Secondary School:

Were special education services received in elementary school? (yes or no) _____

If yes, indicate IPRC identification:



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<u>PARENT INFORMATION</u>	
<u>Parent/Guardian #1</u>	<u>Parent/Guardian #2</u>
Name: _____	Name: _____
Address: same as above _____, or _____ _____	Address: same as above _____, or _____ _____
Home: () _____	Home: () _____
Cell: () _____	Cell: () _____
Email: _____	Email: _____

Please be sure the following is enclosed with this application:

1. Algoma District School Board – [Registration Form](#)
2. Copy of **Final Grade 7** and **Grade 8 Progress** Report
3. **Resume of Activities**
4. **Written Response**
5. Ask a mentor/teacher to complete the **“Personal Reference”**. Include the reference in a sealed envelope with this application *or* have them send it to Korah Collegiate c/o Student Services.
6. Indicate any **“reach ahead/AP”** classes you have taken, *or plan* to take.
math _____ science _____ other? _____
7. **Indicate your two grade 9 options:**

Visual Arts (AVI10)

or

Music (AMU10)

or

Computer Technology (TEJ20)

Technology and the Skilled Trades (TAS10)



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Written Response

To be completed by the student, in paragraph form.

Describe your strengths as a student.

Student Signature: _____

Parent Signature: _____

Date: _____



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Personal Reference

To be completed by a community member (coach, mentor, etc.) or teacher who knows you well and is *not* a family member. Return this reference in a sealed envelope with the application package, send it to Korah Collegiate c/o Student Services, or email it directly to johnstk@adsb.on.ca.

Name of Applicant: _____					
Name of Referrer: _____					
Describe your relationship to the applicant.					
Based on the following criteria, indicate the extent to which you would recommend the applicant for the Enhanced Learning Programme.					
	Never		Sometimes		Always
Descriptors:					
Ability to work independently.	1	2	3	4	5
Demonstrates good organizational skills.	1	2	3	4	5
Use of effective time management strategies.	1	2	3	4	5
Collaborates within a group/team setting.	1	2	3	4	5
Demonstrates initiative.	1	2	3	4	5
Shows an interest in learning new skills.	1	2	3	4	5
Briefly explain your reasons for recommending the applicant.					
Signature: _____					