



Student Name: _____ Date: _____

School: _____ Counselor: _____

Course Selection

Identify the courses you wish to take by order of preference. Place the appropriate preference number next to the course. If you are not interested in a particular course place an N/A in the blank.

How many courses do you wish to take? _____

If you are **not chosen for your first choice** do you wish to take your alternative courses in the order of selection. **Please circle Yes or No.** **Yes** **No**

Biology _____ Chemistry _____

Calculus _____ English Literature _____

Human Geography _____

We would like to know why you have chosen this/these course(s) as your AP selections. Please write a few lines specifying why you wish to take each of the AP courses that you have selected and why you chose the course you identified. **For course info go to: <http://www.avrsbvap.myavrsb.ca/> .**

*******Students complete the first two pages and then pass all three pages to your reference teacher. The teacher will then pass all 3 pages to the school counselor.**
Counselors: Please make sure a transcript of marks has been attached when submitting the registration form.

Student Information: (Please print very neatly and make dots and dashes legible)

Student e-mail address (one you check daily): _____

Secondary e-mail address (school account) _____

(Note: All courses require school e-mail accounts)

Student Home Phone Number: _____



Virtual AP Self-Assessment Form

If you are an independent learner, highly self-motivated and interested in accelerating your course of study, online learning may be appropriate to you. However, if you cannot set and maintain a schedule for your courses it is likely you will fall behind. In that case online learning may not be a good option. The following self assessment may help you decide if online learning is a good match with your learning style, schedule and technology skills.

This describes.....(circle your selection)	Very Much	2	A Bit Like Me	4	Not At All
My Learning Environment					
1. I have a specific place in mind where I will be able to study and work on my course assignments.	1	2	3	4	5
2. The place I study will be relatively free from interruptions and distractions.	1	2	3	4	5
3. I believe my family and friend will really support me as I work towards my educational goals.	1	2	3	4	5
4. I expect to be able to spend 10 – 12 hours on my online course each week (including class time)	1	2	3	4	5
My Life Skills					
5. I do not get easily discouraged when I run into difficulties.	1	2	3	4	5
6. I am a good time manager.	1	2	3	4	5
7. I always see a project through to the end.	1	2	3	4	5
8. I can often complete difficult tasks on my own, even if others do not provide support and encouragement.	1	2	3	4	5
9. I usually manage to get everything done in a day that I try to do so.	1	2	3	4	5
My Course Expectations					
10. I would expect to spend at least as much time in a distance learning course as an in-school course.	1	2	3	4	5
11. I usually expect to get good grades in the courses that I take.	1	2	3	4	5
12. I view taking an online course as a challenge and will not allow it to overwhelm me.	1	2	3	4	5
13. If I have a problem I usually contact the teacher.	1	2	3	4	5
14. I think of myself as a good student (i.e. – take good notes, prepare and study for exams, employ good study habits)	1	2	3	4	5
15. I can capably read for comprehension in English.	1	2	3	4	5
16. I like learning and am excited about new courses.	1	2	3	4	5
Me and Technology					
17. I have the basic computer skills and internet knowledge required to be successful in online courses.	1	2	3	4	5
18. I feel comfortable with the technology I have to use with my courses (scanners, digital cameras, printers)	1	2	3	4	5
19. I believe I can work independently without the traditional class arrangement.	1	2	3	4	5
20. I have been able to maintain at least an 80% average in my courses of study.	1	2	3	4	5
Me and Virtual AP Courses (Please place a check mark in the box to the right to indicate you have read the following points)					
21. I am aware that these courses are offered outside normal school hours. (before and after school)	<input type="checkbox"/>				
22. I am aware that there is an official drop date, without penalty, for all courses. (date available from course instructor or website FAQ's)	<input type="checkbox"/>				
23. I am aware that courses may require personal transportation for labs at host schools or special field trips.	<input type="checkbox"/>				
24. I am aware that I am responsible for transportation to morning classes.	<input type="checkbox"/>				
25. I am aware that I may take this course from home if high speed internet is available.	<input type="checkbox"/>				
26. I am aware that course selection notifications will be sent to my school the first week in May.	<input type="checkbox"/>				

***** Please staple this assessment to your application form.



Teacher Reference Form

(This is to be completed by a teacher who is familiar with the student's academic ability and background)

Teacher Name: _____

Courses in which the teacher has taught the student: _____

AP Course(s) that student is applying for: _____

Student Name: _____

Could you rate the student on the characteristics listed below on a 1 to 3 basis.

1 – Excellent 2 – Good 3 – Fair

Personal Attributes	1	2	3
1. Do you feel the student is a good independent learner and capable of working on his/her own?			
2. Does the student have the academic ability to undertake a course of this nature?			
3. In your opinion does the student have good time management skills?			
4. Does the student have good ability to communicate in writing?			
5. Does the student have the technological skills to undertake a course of this nature?			
6. Can the student read a textbook easily and comprehend what he or she is reading?			
7. Does the student follow directions when partaking in a task?			
8. Is the student prompt in passing in assignments?			
9. Do you feel the student has the personal commitment to complete a course of this nature?			

Please add any comments that may play a role in this student's acceptance to the chosen course. **These comments play an important role in the registration process and can be added in the space below.**

Reference Signature: _____ Date: _____

***** **Referee:** Please pass all 3 forms to Student Services by the date assigned by Student Services. This is usually prior to March Break. **Schools must submit to the AVRSB AP coordinator by no later than Wednesday March 30th.**