

PARENT/GUARDIAN INFORMATION

Surname: _____
First name: _____
Address: _____
City: _____ Postal Code: _____
Tel: (H) _____
Tel: (C) _____

PAYMENT OPTIONS

ONLINE :

Full payment: Using PayPal or any major Credit Card
at <http://ce.ycdsb.ca>

MAIL IN:

Full payment: \$539 Cheque or Visa

OR

Two instalments : Cheque or Visa
\$339 - 1st payment dated the first day of the program
\$200 - 2nd payment dated 4 weeks after start date

(Cheques payable to YCDSB - \$25 fee for RTD cheques)

VISA Card #: _____

Expiry date:: M _____ Y _____ Total \$ _____

Name on card: _____

Cardholder Signature _____

Student Signature _____

I certify that the statements in this document are accurate and consent to the release of any information contained herein to the Ministry of Transportation, Insurance Bureau of Canada and the MTO Course Inspector.

Freedom of Information: Personal Information on this form is collected under the authority of the Education Act, R.S.O. 1990, c. E.2., and the Municipal Freedom of Information and protection of Privacy Act, R.S.O. C.M. 56 and will be used by the Adult and Continuing Education Department and the Administrators of the applicable School Centre. These forms will be confidentially disposed of at the conclusion of the program.

Parent/Guardian Signature _____

Date _____

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**2017 SUMMER
In-Class Schedule & Locations**

**July 10-13/17 and August 14-17/17
9:00 am - 2:30 pm
(break incl.)**

SUMMER SCHOOL LOCATIONS

Aurora

St. Maximilian Kolbe CHS - 278 Wellington St. E.

Keswick

Our Lady of the Lake CCS - 185 Glenwoods Ave.

Maple

St. Joan of Arc CHS - 1 St. Joan of Arc Ave.

Markham

St. Augustine CHS - 2188 Rodick Rd.
St. Brother Andre CHS - 6160 - 16th Ave. E.

Richmond Hill

St. Theresa of Lisieux CHS - 230 Shaftsbury Ave.

Thornhill

St. Elizabeth CHS - 525 New Westminster Dr.

Woodbridge

Holy Cross CA - 7501 Martin Grove Rd.

AUGUST 21-24/17

**Catholic Education Centre,
320 Bloomington Rd., W. Aurora**

**9:00 am to 2:30 pm
(break incl.)**



**FALL
BROCHURE
COMING SOON!**



**YORK CATHOLIC DISTRICT
SCHOOL BOARD**
Continuing Education Department



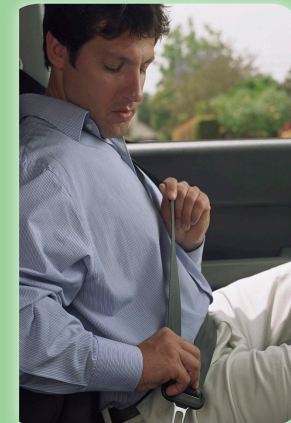
**20 hour course in
just 8 weeks.**



2017

**SUMMER
DRIVER EDUCATION**

Become a responsible driver!



Get ready for the road.

Visit us at:

**[http:// ce.ycdsb.ca](http://ce.ycdsb.ca)
To Register & Pay Online!**

Tel: 416.221.5051 ext.13629

Fax: 905.841.6940

Continuing Education Department
320 Bloomington Road W. ,
Aurora, ON L4G 0M1

DRIVER EDUCATION PROGRAM

The York Catholic District School Board offers a Ministry Approved Beginner Driver Education Course Provider program to secondary school students in York Region.



YORK CATHOLIC DISTRICT SCHOOL BOARD
Continuing Education Department
320 Bloomington Road W.
Aurora, ON L4G 0M1



PROGRAM INFORMATION

In-Class Instruction

- 20 hours of in-class instruction using an approved Ministry curriculum.
- 10 hours of home links in-class/home assignments.
- To successfully complete the course, 100% attendance is required and 70% achievement must be attained on tests and assignments.
- Transportation to and from the in-class portion of the program is the responsibility of each student.
- Students who miss a class will be required to attend an additional class. There will be no make up assignments.
- Students must purchase and bring to each class The Official MTO Driver's Handbook.
- There will be a \$10 replacement fee for lost workbooks.

In-Car Instruction

- Students will book their in-car lessons with the in-car instructor.
- Each student receives 10 hours of in-car instruction in pairs in 1 or 2 hour sessions.
- Students waiting for their G1 Learner's Permit may still register, but must obtain their G1 no later than 2 weeks after the start date. Students can not start their in-car lessons without their G1.
- Students will be picked up and dropped off either at the high school or home.
- Students must attain 75% achievement on the in-car program.
- A \$30 cancellation charge will apply to any in-car session that is not cancelled more than 24 hours in advance of the scheduled appointment.
- Students must complete all course components within 12 months of the start date to successfully complete the course.

PROGRAM FEES INCLUDES

- 20 hours in-class instruction
- 10 hours in-car instruction
- 10 hours of Home links (in-class/home assignments)
- CARS Driver Education Workbook
- The Road Test is NOT part of the YCDSB Driver Education Program

Note: Beginner Driver Education(BDE) graduates may be eligible for an insurance discount.

CERTIFICATION PROCESS and PROOF OF COURSE COMPLETION

Once a student has successfully completed the course, the student's driver record is updated with the Ministry of Transportation. This update is done on-line through the Ministry of Transportation Beginner Driver Education Certification website. Once the student certification is processed a Letter of Completion will be mailed to the student with their marks and completion date. Students requiring proof of course completion from the MTO directly need to obtain their "Driver's Licence History (DLH)". Students may request this in person at a MTO Driver and Vehicle Issuing Office or by mail. For more information, please contact Service Ontario at 1-800-387-3445.

PAYMENT OPTIONS

OPTION 1 - Register & Pay ON-LINE

Log onto: <http://ce.ycdsb.ca>

OPTION 2 - Mail in completed Registration Form

Full payment : \$539 Cheque or VISA
(Cheque payable to YCDSB - \$25 fee for RTD cheques)

OR

Two instalments: Cheque or VISA
\$339 (dated the first day of the program)
\$200 (dated 4 weeks after start date)
(Cheque payable to YCDSB - \$25 fee for RTD cheques)

SUMMER 2017 DRIVER EDUCATION PROGRAM

SELECT PROGRAM LOCATION & START DATE

Please note: *If classes are cancelled due to low enrolment, students will be notified by email.*

Location: _____

Program Start Date: _____

2nd Location choice(if any): _____

Program Start Date: _____

Students must be 16 years old and have obtained their G1 Driver's Licence no later than 2 weeks after the program start date.

Please print clearly.

STUDENT INFORMATION

Surname: _____

(As per G1 Licence)

First name: _____

Middle name(s): _____

Address: _____

City: _____ Postal Code: _____

Tel: _____

Email (mandatory): _____

(Enrolment will be confirmed by email only)

Sex: Male ___ Female ___ Grade: _____

Date of Birth: D ___ M ___ Y _____

Secondary School: _____

G1 Driver's License Permit No. _____

G1 Expiry date: _____

ADDITIONAL INFORMATION

Emergency Contact: _____

Tel: _____ Other: _____

Please state below any health problems or allergies:

