



# Dual Credit Consent Form

School College Work Initiative  
(SCWI)



## PARTICIPATION CONSENT & AUTHORIZATION FOR RELEASE AND RETENTION OF STUDENT INFORMATION FORM

St. Lawrence College abides by the confidentiality of the student records policy, which protects the privacy of personal information held on student records. This policy is now supported by the Freedom of Information and Protection of Privacy Act which came into effect January 1, 1989. In compliance with the Freedom of Information Act, Section 42 (b), St. Lawrence College cannot release student information without the written authorization of the student. Completion of this form authorizes the release of information as specified by you.

**NAME OF STUDENT (first name, last name)** \_\_\_\_\_

- 1) I give my consent that upon registration to the Dual Credit Program at St. Lawrence College, the required applicant information and SCWI student participation data (i.e., Ontario Education Number (OEN), Name, Address/Phone, Gender, Date of Birth, Indigenous Status, First Generation Status, Primary Target Group (PTG) Status, Returning to High School Status, Individual Education Plan Status (IEP), Special High Skills Major (SHSM) Participation, Ontario Youth Apprenticeship Program (OYAP) Participation, School within a College (SWAC) Participation), High School Level and Credit Accumulation at the time of application) will be kept private, by the College in an electronic format for an indefinite amount of time.
- 2) I give my consent to St. Lawrence College to release my Dual Credit application information, confirmation of registration, Dual Credit academic records, as requested, to my high school, the Dual Credit Coordinator and/or Dual Credit Teacher as assigned by my school board.3) I am aware of Dual Credit Policy and Program Requirements (Refer to: <https://files.ontario.ca/edu-dual-credit-programs-policyprogram-requirements-2020-en-2021-12-13.pdf> ) and agree to travel to the specified campus for College classes (if applicable). I will do my best to attend my classes as scheduled.
- 3) I understand that withdrawal from the Dual Credit program can be actioned by the student’s home high school. This may be due to a failure to adhere to the relevant District School Board Code of Conduct (including but not limited to when student in engaged in activities as related to Dual Credit College course), or because of an incident of student misconduct as per St Lawrence College policy.
- 4) To the best of my ability, I will attend my scheduled Dual Credit Orientation Session and Dual Credit course classes.

***I have read and understand the commitment that I am making to the dual credit program.***

**Student Signature** \_\_\_\_\_

**Parent/Guardian Signature** (If student is under 18 years of age) \_\_\_\_\_

**High School Teacher Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

*Note: the following is not a requirement for program participation: I authorize the use of my picture and feedback comments for the purposes of reporting and promoting this program (most cases feedback is anonymous).*

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent/Guardian Signature** (If student is under 18 years of age) \_\_\_\_\_

**Note: Completed forms to be retained at the student’s high school and an electronic copy sent to: [dualcredit@sl.on.ca](mailto:dualcredit@sl.on.ca)**