

Graduated Student Learning Plan

Student's Name: _____ Birthdate: YYYY/MM/DD _____

Home Phone No: _____ Cell No: _____

E-mail address: _____

Legal Guardian(s) (students who are under 19): _____

Phone No: _____ Relationship to student: _____

BC's Ministry of Education is offering the following tuition-free courses for graduated students:

English Foundations (level 1-7)
Math Foundations (level 1-7)
Anatomy & Physiology 12
English Studies 12
Life Sciences 11

Chemistry 11
Chemistry 12
Composition 11
Math 12 (FOM, PREC)

Physics 11
Physics 12
Math 11 (WPM, FOM, PREC)

It is helpful for both LEC and the Ministry to know why you have chosen a particular course. In the spaces provided below please name the course that you have selected and answer the two questions.

Course(s) you plan to take this year	For what specific post-secondary program do you require this course?	For what specific employment opportunity are you preparing?	Student Signature	Dated
e.g. Anatomy & Physiology	e.g. Bachelor of Science in Nursing at UBC	e.g. A career in nursing	Your signature	YYYY/MM/DD
				YYYY/MM/DD
				YYYY/MM/DD
				YYYY/MM/DD
				YYYY/MM/DD

Office Notes
