

Westmount High School

REGISTRATION PACKAGE

2026-2027



**In order for your child's registration to be complete,
Westmount must be in possession of the following documents:**

- ☐ Westmount High School Information Form
- ☐ Original Long Version Birth Certificate (with parent names)
- ☐ Proof of Residence, if child was born outside of Quebec
 - () Category 1 () Category 2
- ☐ Original Eligibility Certificate
- ☐ Final Grade 4 and Grade 5 report cards
- ☐ Original Immigration Documentation (if applicable)
 - ☐ Canadian Citizenship Papers if child was born outside of Canada
 - ☐ Work Permit
 - ☐ Study Permit
- ☐ Course Selection Sheet
- ☐ EMSB Consent to Photograph Form
- ☐ Authorization for Release of Information Form
- ☐ Parent Questionnaire
- ☐ Emergency Health Record
- ☐ Inter-board Agreement (if applicable)
- ☐ \$75.00 certified cheque, debit/credit card or cash to cover the basic school fee

WESTMOUNT HIGH SCHOOL

Information Form

STUDENT INFORMATION (Please print clearly)

Family Name: _____ Gender: _____
Given Name: _____ Birth Date: ____/____/____
Main Address: _____ Apt# _____
City: _____ Postal Code: _____ Home Tel: _____
Mother Tongue: _____ Languages spoken at home: _____
Medicare Number: _____ Expiry Date: _____
Name of Present School: _____ Grade: _____
Present Program: ☐ English ☐ French ☐ Immersion French
Siblings Presently at WHS: _____

PARENT/GUARDIAN INFORMATION (Please print clearly)

Name of person(s) Legally Responsible: _____
Parent 1 Name: _____ Relationship to student: _____
Email (required): _____
Date of Birth: _____ Place of Birth: _____
Work Number: _____ Cell #: _____
Parent 2 Name: _____ Relationship to student: : _____
Email (required): _____
Date of Birth: _____ Place of Birth: _____
Work Number: _____ Cell #: _____
Student living with: ☐ Both Parents ☐ Parent 1 ☐ Parent 2 ☐ Guardian
If applicable: ☐ Joint custody ☐ Sole custody

Parent 1 Address: _____ apt# _____
City: _____ Postal Code: _____ Home Tel: _____
Parent 2 Address: _____ apt# _____
City: _____ Postal Code: _____ Home Tel: _____

If Guardian is NOT Parent

Guardian's Name: _____ **Email Address (required):** _____
Guardian's Work Number: _____ Cell #: _____
Gender: _____ Place of Birth: _____
Address: _____ apt# _____
City: _____ Postal Code: _____ Home Tel: _____

EMERGENCY CONTACT INFORMATION (Please print clearly)

(In case parent or guardian cannot be contacted at home, by cell or at work)

Contact's Name: _____ Relationship _____
Home Tel.# _____ Cell # _____ Work Tel.# _____

Date: _____ Legal Parent/Guardian Signature: _____



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APPENDIX A

Consent to Photograph, Record, Video Students and Publish, Display, Distribute or Broadcast Students' Image or Work and Assign Student Email

During the course of the school year, students at Westmount High School are occasionally videotaped, recorded and or photographed for a variety of reasons, including school awards, special recognition, yearbooks, video projects and news programming. The student's name, school and grade may accompany such photographs, videos and web pages.

Some of these photographs / video images are published, displayed, distributed or broadcast outside of the school network and in these cases the School Board is required to obtain consent.

Also, during the school year, an email address may be assigned to a student.

Please fill in the requested information and check either Yes or No below to indicate whether you wish to give or not give your consent.

Student Name: _____

School: _____

I hereby release the school and the School Board from any liability or damages resulting from or connected with:

The photographing, recording or video of a student: **Yes:** _____ **No:** _____

**The publishing, displaying, distribution or
broadcasting of image/work:** **Yes:** _____ **No:** _____

Signature: _____

Parent / Guardian / Adult Student

Date: _____

Please return this signed with your child's registration.

WESTMOUNT HIGH SCHOOL

To be completed by Parent/Guardian

Parents, please take the time to complete the following to get a more accurate portrait of who your child is – a portrait that a report card cannot fully represent.

Student's Name: _____
Family Name Given Name

Parent/Guardian Name: _____
Family Name Given Name

Student's Academic History

Student's Previous Schools: _____ *Grade(s) :* _____
_____ *Grade(s) :* _____
_____ *Grade(s) :* _____

What is the last grade your child successfully completed? _____

Has your child ever received any academic, sports, improvement or behavior awards?

Please describe _____

Has your child ever skipped a level or been accelerated in a subject?

Has your child ever repeated a level? Indicate level: _____

Has your child had remedial help? Please indicate subject(s), level(s) and frequency.

Has your child ever had an individualized educational plan or other resource services?

☐ Yes If yes, please include copy of the IEP ☐ No

Is there anything about your child's behavior that you would want us to know or which will help us to understand him/her better? You may include interests, hobbies, study patterns, health issues, social issues, strengths and weaknesses.



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AUTHORIZATION TO RELEASE INFORMATION

| | |
|------------------------------------------------------|------------------------------------------------------|
| Student`s Family Name | Student`s First Name |
| Student`s Date of Birth (Year/Month/Day) | Permanent Code |
| Parent 1 Family Name First Name | Parent 2 Family Name First Name |
| Relationship to Student: | Relationship to Student: |

I, the undersigned authorize

| |
|---------------------------|
| Person`s Name and Title |
| Name of Present School: |
| Address |
| City/Province/Postal Code |

to send the following information

- ☐ Psychological/psycho-educational
- ☐ Psychiatric (full diagnostic report)
- ☐ Speech/language
- ☐ Occupational therapy
- ☐ Academic reports (e.g. IEP, Progress notes)
- ☐ Other: _____

concerning the above-mentioned child to:

*Student Services
Westmount High School
4350 St. Catherine Street West
Westmount, Quebec, H3Z1R1*

| | |
|------------------------------------------|-----------------------|
| Signature of Parent or Authorized Person | Date (Year/Month/Day) |
| Witness to the Signature | Date (Year/Month/Day) |

WESTMOUNT HIGH SCHOOL

Signature of parent/guardian

Date: ____ / ____ / ____
Year Month Day

Emergency Health Records 2026-2027

WESTMOUNT HIGH SCHOOL

Additional information

(Fill only if your child has health problems that might require immediate intervention at school)

Has your child's state of health changed since last year: Yes ☐ No ☐

Does your child suffer from:

| | | | |
|-------------------------------|--------------------|------------------------------|--------------------------------------------------------------------------------------------|
| SEVERE ALLERGY : To | ➤ Food : | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| | ➤ Insect bites: | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| | ➤ Other: | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| | or ASTHMA : | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| If so, specify : _____ | | | |
| Emergency medication : | | Yes <input type="checkbox"/> | EpiPen or Twinject or Allerject : Yes <input type="checkbox"/> No <input type="checkbox"/> |
| | | No <input type="checkbox"/> | Other : _____ |

| | | |
|-----------------------------------------------------|------------------------------|-----------------------------|
| DIABETES: | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Emergency medication : | Yes <input type="checkbox"/> | Specify : _____ |
| | No <input type="checkbox"/> | |
| <input type="checkbox"/> Emergency care plan: _____ | | |
| Other information in case of emergency _____ | | |

| | | |
|---------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------|
| OTHERS : Does your child suffer from any other problems that may require immediate assistance at school ? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| If so, specify : _____ | | |
| Medical recommendation in case of emergency : | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Specify : _____ | | |

| | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|-----------|
| I authorize the CSSS to keep this information on file, in a confidential manner and I authorize the CSSS nurse to transmit the information contained in this document to the school staff who may have to intervene in case of emergency. | | |
| _____ | Date : ____ / ____ / ____ | |
| Signature of parent/guardian | Year | Month Day |
| Changes in the state of health (during the school year): | | |
| _____ | | |
| _____ | | |
| _____ | | |
| _____ | | |
| _____ | | |



Secondary 4

Math Options

| Cultural-Scientific-Technical (CST) Math: 563-414 | Science (SN) Math: 565-426 | Pre-AP Science (SN) Math: 565-506 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| The Cultural, Social and Technical option is intended for students who like to design objects and activities, develop projects or participate in making them or carrying them out. It involves a greater use of statics and discrete mathematics. This program is ideal for students pursuing careers in the Arts, Communications, Business Marketing and the Social Sciences. | The Science Option is intended for students who seek to understand the origin of different phenomena and how they work, as well as to explain them and make decisions that pertain to them. Students who choose this option develop strategies and acquire an academic background that specially enables them to pursue their studies in Sciences or perhaps eventually specialize in research. | This Math option builds on the knowledge gained in the Secondary 4 Science math curriculum and is intended for students who have followed the accelerated math program and who have successfully completed the Science Math 565-426 course and who are wishing to pursue Calculus in Secondary 5. |
| | Prerequisites: 75% or better in Math 306 (regular) and final approval by administration. | Prerequisites: successful completion of the 565-426 course with a final grade of 75% or better. |

Science Path

| Environmental Science and Technology: 558-404 | AP Environmental Science and Technology: 558-404 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| In this program, the concept of environment refers to a set of elements in a community that interact with one another and with a group of living organisms. Thus, there is not only one environment but many, defined by their component element, their spatial and temporal boundaries, the types of living organisms that live there, and the types of relationships between them. The different elements of the environment as well as the impact of science and technology are the subject of scientific study in this course. A particular emphasis is placed on citizenship and scientific skills. | This is a continuation of the pre-AP Environmental Science and Technology elective course at the grade 9 level. In this program, students study the same material as in the regular Environmental Science program and in addition, students are prepared to write the AP Environmental Science exam in May where they can earn college or university credit while still in high school. |
| Prerequisites: Math and science grades 75% or better and final approval by administration Co-requisites: Science & Tech. 404 and SN Math 565-426 | Pre-requisites and co-requisites: Same as for Environmental Science & Technology + students must have completed year one of the program. |

Arts Options

Drama: 670-402

The goal of this course is to investigate, challenge and express your creative side in drama. During the year students will be introduced to several theatrical performances and learn how to interpret them as a writer, actor and reader. The focus will be on *how* the students express, develop and formulate their ideas, *not*, whether their ideas are correct or incorrect.

Students will be evaluated not only through class activities, but also by the process that they will take to obtain their goals in the class. For example: skits that are produced will be evaluated by not just the performance, but by the effort made in the group, its creativity, proper use of rehearsal time, use of class time and so on. Students will also delve into a play in order to learn how to use theatre as a tool for social change through acting, performing and writing.

Intro to Media Arts/Expression in Wood: 668-494

This course offers students the opportunity to become familiar with the vocational training sectors, particularly in the wood, pulp and paper industry, and the job market for these trades and occupations. This course provides an introduction to woodworking and is ideal for the student who wishes to learn how to design, implement and produce projects using wood and wood related materials. The course is semestered and students also receive instruction in media arts, including photography and 2D and 3D art techniques. Students can use their creativity to express themselves in various media.

Music Performance: 669-402/669-412 (4 Period or 2 Period)

Students play a woodwind, brass, or rhythm section instrument in a cohesive ensemble. As performing musicians, WHS students play a variety of classical and contemporary pieces. Band members improvise in addition to reading notation, and create their own composition in a variety of genres. Musicians have a great deal of input into the selection of class material. Performance opportunities may include school assemblies, intra-mural festivals and competitions, acoustic nights, and many others.

Prerequisite: *Permission by the Music Department (need to be able to read music and play an instrument)*

Pre-AP Visual Arts: 668-402

The purpose of this course is to expose students to various elements and modalities used in the field of visual arts. By engaging in hands on tasks of creating and appreciating the various art forms, students will deepen their awareness and knowledge of the world of art and value its contribution. Students begin to assemble portfolio pieces that may be used to create a comprehensive portfolio for AP Studio Art in Secondary 5. Options include: Drawing, two-dimensional and three-dimensional portfolios.

Prerequisite: *Permission by the Art Department*

AP Seminar-Nature: 602-502 (New course offering)

AP Seminar (Nature) invites students to explore real-world issues through research, writing, and discussion, all connected to the theme of nature and environment. Students learn to analyze information from multiple sources, consider different perspectives, and communicate their own ideas clearly through research essays and focused presentations. As the theme of the AP Seminar at WHS is “nature”, there are outdoor learning experiences that connect the “head, heart and hands”. With a mix of classroom learning and outdoor experiences, the course helps students build strong critical thinking skills and the confidence to create well-supported, evidence-based arguments. Students will have the opportunity to earn College Board credits in addition to high school leaving credits.

Prerequisite: *None*



Westmount High School
A College Board Advanced Placement School

4350 Ste. Catherine Street West, Westmount, QC H3Z 1R1
Tel.: 514-933-2701 Fax: 514-933-2663
www.emsb.qc.ca/westmount



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| | | | | | | | | |
|--------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------|--|-------------------------------------|
| Print Clearly - Family Name: | | | | | | | | |
| Print Clearly - First Name: | | | | Homeroom | | | | |
| Number of periods | 2026-2027 | Please select PROGRAM of choice ENGLISH or IMMERSION (final approval by administration) | | | | | | |
| | Cycle 2 / Year 2 (Secondary 4) | | | | | | | |
| ENGLISH PROGRAM | | <input checked="" type="checkbox"/> | | | | | | |
| 6 | 634404 French Second Language | | | | | | | |
| 4 | 585404 History Quebec and Canada | | | | | | | |
| 6 | 555444 Science & Technology | | | | | | | |
| 6 | 632406 English Language Arts | | | | | 632406 English AP (Office Use Only) | | <input checked="" type="checkbox"/> |
| 6 | 563414 Math Cultural - Social- Tech (CST) or | | | | | | | Select only one Math course |
| | 565426 Math Science (SN)* or | *Pre-requisite: 75% or greater in Math 563306. | | <input checked="" type="checkbox"/> | | | | |
| | 565506 Math Pre-AP** | ** Pre-requisite: 75% or greater in Math 565426. | | | | | | |
| 2 | 543402 Physical Education | | | | | | | |
| 2 | 580404 Culture and Citizenship in Québec | | | | | | | |
| IMMERSION PROGRAM | | <input checked="" type="checkbox"/> | | | | | | |
| 6 | 635406 Français Enrichi / AP | | | | | | | |
| 4 | 085404 Histoire du Québec et du Canada | | | | | | | |
| 6 | 632406 English Language Arts | | | | | 632406 English AP (Office Use Only) | | <input checked="" type="checkbox"/> |
| 6 | 563414 Math Cultural - Social- Tech (CST) or | | | | | | | Select only one Math course |
| | 565426 Math Science (SN) * or | | | | | *Pre-requisite: 75% or greater in Math 563306. | | |
| | 565506 Math Pre-AP ** | ** Pre-requisite: 75% or greater in Math 565426. | | | | | | |
| 6 | 555444 Science & Technology | | | | | | | |
| 2 | 543402 Physical Education | | | | | | | |
| 2 | 080404 Culture et citoyenneté québécoise | | | | | | | |
| Please select either the SCIENCES Path OR the ARTS Path below: | | | | | | | | |
| ** Pre-requisite : Science 555306 & Math 563306 (Regular) final mark 75% or greater. | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | | | | |
| SCIENCES PATH** select one of the Sciences below | | | OR | ARTS PATH | | | | |
| 2 | 558404 Environ. Science & Technology AP (pre-requisite Sec. 3 Science Pre-AP program)** | | | Arts Education (options below) | | | | |
| | OR | | | | | | | |
| | 558404 Environ. Science & Technology ** | | | | | | | |
| Number of periods | Sciences Path students will receive 1, two period option below. Please number in the order of preference 1, 2, 3, 4 and 5. | | Number of periods | ARTS Path students will receive 2, two period options below. Please number in the order of preference 1, 2, 3, 4 and 5. | | | | |
| 2 | 602502 AP Seminar - Nature | | 2 | 602502 AP Seminar - Nature | | | | |
| 2 | 670402 Drama | | 2 | 670402 Drama | | | | |
| 2 | 669402 Music (previous knowledge playing an instrument is required) | | 2 | 669402 Music (previous knowledge playing an instrument is required) | | | | |
| 2 | 668402 Visual Arts Pre-AP | | 2 | 668402 Visual Arts Pre-AP | | | | |
| 2 | 699442 Art Techn. Exploratory / 680452 Media Arts | | 2 | 699442 Art Techn. Exploratory / 680452 Media Arts | | | | |
| 36 | | | | | | | | |

Date

Signature of Student

Signature of Parent / Guardian

I will not be returning to Westmount High School for the 2026/27 school year

Reason:



Westmount High School

A College Board Advanced Placement School

4350 Ste. Catherine Street West, Westmount, QC H3Z 1R1

Tel.: 514-933-2701 Fax: 514-933-2663

www.emsb.qc.ca/westmount



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Student and Course Selection: 2026-2027

- All students shall adhere to the school uniform and purchase it from our supplier.
- All students are expected to arrive on time and attend all scheduled classes daily.
- All students must work to the best of their abilities and cooperate with their teachers.
- Students are expected to be respectful towards each other, the staff, and any other adult.
- There will be zero tolerance for any student who makes it difficult for a teacher to teach or student to learn.

We have read the Westmount High School course selection sheet and expectations. We understand the contents and shall adhere to its implications.

Parent or legal guardian's signature

Student's signature

Date: _____

Parent/Guardian's e-mail: _____

No registration shall be accepted without the parent (or legal guardian) **and** student's signatures.