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| Examples of Previous Projects:* Course on Microsoft Word
* Building of Scale Models
* Animal Husbandry
* Video Production
* Remote Control Technology
* All Things Musical
* Abstract Painting
* Photography
* Creative Writing
* Personal Photo Journal
* Wherever Your Heart takes you…
 |
| PEACE WAPITI PUBLIC SCHOOL DIVISION NO. 76EDUCATING TODAY FOR SUCCESS TOMORROW |

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| Enriched Personal inquirydon’t miss your opportunity to explore your interestsstudent led independent studyregister now for september and january projects turn over for details |
|  |
| contact:Nicole Gillies780-864-1616nicolegillies@pwsd76.ab.ca Heather Dunsworth780-864-1615heatherdunsworth@pwsd76.ab.ca  |
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| Does the idea of creating your own project, excite you??? If so, bring this form home to your parents/guardians for registration: |

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Grade: \_\_\_\_
3. School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Contact Information (phone/email):

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Where would I like to do my study (home, school, other)?
2. Background Information (my area of interest):
3. Details of my study…what am I going to: do/consider/sing/create/observe/paint/study/dance/draw/interview/perform, etc.?

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (parent/guardian) approve the involvement of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (student) in the Peace Wapiti School Division EPI program. I understand that there will be an in-school time commitment that is agreed upon between the school (administration and classroom teacher), student and family.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature Student Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Administration Classroom Teacher

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Participating School