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Student Last Name		Student First Name	
Student Number		OEN	
	eLearning Course Code (From list on website)	Preferred Semester	Student Signature
First Choice			
Second Choice			

Parent/Guardian:Please read the material listed on the website with your child. Indicate in the checkbox below that you have read all material o } š } v š Z Pe µ + Œ] v Œ - website before returning this form.
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Guidance (Print Name)	Guidance (signature)

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