



Destination: **Agriculture** (Original to SHSM Lead, copy to Guidance and Student)

WODSS Specialist High Skills Major (SHSM) - Registration Form 2024/25

Student: _____ Grade: _____ Date: _____

You will have to complete the course requirements outlined in the table below in order to be granted the SHSM designation on your Ontario Secondary School Diploma.

Please **check off** the courses you have taken and **circle** the ones you plan on taking.

<p>Complete 4 MAJOR courses:</p> <ul style="list-style-type: none"> <input type="checkbox"/> BAF3M - Accounting <input type="checkbox"/> BDI3C - Entrepreneurship <input type="checkbox"/> BMI3C/BMX3E - Marketing <input type="checkbox"/> IDC30X - Leadership <input type="checkbox"/> SBI3C/SBI3U - Biology <input type="checkbox"/> SCH3C/SCH3U - Chemistry <input type="checkbox"/> SPH3C/SPH3U - Physics <input type="checkbox"/> SVN3E/SVN3M - Environmental Science <input type="checkbox"/> TCJ3E - Construction <input type="checkbox"/> TDJ3M - Technological Design <input type="checkbox"/> THJ3E/THJ3M - Green Industries <input type="checkbox"/> TMJ3C/TMJ3E - Manufacturing <input type="checkbox"/> TTJ3C/TTJ3O - Transportation <input type="checkbox"/> TWJ3E - Custom Woodworking <input type="checkbox"/> BAT4M - Accounting <input type="checkbox"/> BOG4E/BOH4M - Business Leadership <input type="checkbox"/> HFA4U - Nutrition & Health <input type="checkbox"/> IDC4UI(X) - Leadership/Yearbook <input type="checkbox"/> SBI4C/SBI4U - Biology <input type="checkbox"/> SCH4C/SCH4U - Chemistry <input type="checkbox"/> SPH4C/SPH4U - Physics <input type="checkbox"/> TCJ4E - Construction <input type="checkbox"/> TDJ4M - Technological Design <input type="checkbox"/> THJ4E/THJ4M - Green Industries <input type="checkbox"/> TMJ4C/TMJ4E - Manufacturing <input type="checkbox"/> TTJ4C - Transportation <input type="checkbox"/> TWJ4E - Custom Woodworking <p>*Co-op credits related to the sector may be substituted for 1 or MORE of these 4 credits</p>	<p>Complete 1 Optional course:</p> <ul style="list-style-type: none"> <input type="checkbox"/> BAF3M - Accounting <input type="checkbox"/> BDI3C - Entrepreneurship <input type="checkbox"/> BMI3C/BMX3E - Marketing <input type="checkbox"/> SBI3C/SBI3U - Biology <input type="checkbox"/> SCH3C/SCH3U - Chemistry <input type="checkbox"/> SPH3c/SPH3U - Physics <input type="checkbox"/> SVN3E/SVN3M - Environmental Science <input type="checkbox"/> BAT4M - Accounting <input type="checkbox"/> BBB4M - International Business <input type="checkbox"/> BOG4E/BOH4M - Business Leadership <input type="checkbox"/> SCH4C/SCH4U - Chemistry <input type="checkbox"/> SPH4C/SPH4U - Physics <p>*ONE co-op related to the sector may be substituted</p>	<p>Also Complete:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 1 English credit (Gr.11 or Gr.12) <input type="checkbox"/> 1 Math Credit (Gr.11 or Gr. 12) <input type="checkbox"/> 2 Credit Co-Op Or <input type="checkbox"/> 4 Credit Co-op <p>Specific Pathway (IPP)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Apprenticeship <input type="checkbox"/> College <input type="checkbox"/> Community <input type="checkbox"/> University <input type="checkbox"/> Work <p>Compulsory Certifications(4): CPR, First Aid, WHMIS,</p> <p>Elective Certifications(3): Complete 3 or more certifications *Many embedded in major credits or found on the hub.</p> <p>Experiential Learning/Reach Ahead 2 Free Field Trip</p>
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I, _____ have reviewed the expectations with the SHSM Sector Lead for completing the **SHSM - Agriculture** program at WODSS. I commit to completing these expectations prior to graduation.

Student Signature

Parent Name

Parent Contact Email