

CyberARTS Application

2018



Important Dates

- 1** **Wednesday, November 22, 2017**
CyberARTS Information Night
- 2** **Tuesday, January 16, 2018**
Completed CyberARTS Application
due at Don Mills C.I.
- 3** **January 24, 2018**
DMCI CyberARTS Interviews:

CyberARTS – Don Mills C.I.
15 The Donway East, North York, M3C 1X6
Tel: (416) 395-3192 ext. 20135
Fax: (416) 395-3748

Blakely McAlister, Program Director,
blakely.mcalister@tdsb.on.ca

Imagine. Inspire. Innovate.

CyberARTS at Don Mills C.I. is a multi-disciplinary, integrated four-year art and technology program. Our integrated, project-based curriculum develops artistic and academic skills while encouraging self-esteem, independent work habits and creative / critical thinking. The CyberARTS program offers a leading edge curriculum which is designed to maximize student potential and achievement through a variety of expanded opportunities, which address industry standards in graphic design, multimedia, animation, industrial design, desktop publishing, web design/programming, architectural design, fashion design and visual arts.

CyberARTS is delivered in a project-based, student driven, enriched environment that allows students to integrate artistic expression and knowledge of design with technical experience. We accomplish this through combining the Fine Arts with Computer Technology and Communication Media.

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Application Checklist

APPLICATION CHECKLIST

PART ONE: APPLICATION REQUIREMENTS

- 1. Student Application
(please check that forms are signed)
- 2. Academic Referral
(copy of the most recent progress report from your present school)
- 3. Release of Information Form
(please check that forms are signed)
- 4. Optional Attendance Form
(required for all applicants)

PLEASE DELIVER THE
APPLICATION PACKAGE TO
DON MILLS C.I. BY

Tuesday, January 16, 2018

PART TWO: INTERVIEW, AUDITION, AND PORTFOLIO

1. Interview and Creative Activities

You will be required to participate in an interview and creative activities with staff associated with the program. The interview will involve questions regarding your creativity, interest in technology and experimentation in the arts. Please note that applicants to the Intermediate level do not require extensive technological skills but should demonstrate an interest and talent in visual arts.

2. Portfolio - You are required to bring the following to the interview:

- A Portfolio - It may include: drawings, paintings, mixed media, photographs, video/audio tapes, sculpture, digital images, etc. (max of 10 finished works or items)
- A sketchbook or a collection of materials that demonstrate creativity over a period of time
- A self portrait using a pencil (this will be kept by the school as part of your application)

If you anticipate needing any type of accommodation or have questions about the physical access provided, please call 416 395 3190 or email blakely.mcalister@tdsb.on.ca in advance of your participation or visit.

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Student Application Form

STUDENT APPLICATION FORM

Please ensure that we have the correct contact information to process the application.

PLEASE DELIVER THE APPLICATION PACKAGE TO DON MILLS C.I. BY

Tuesday, January 16, 2018

PERSONAL INFORMATION (PLEASE PRINT)

Last Name		First Name	
Name of Parent/Guardian			
Apartment /Home Address (Number and Street-specify Road, Street, Cres., etc.)			
City		Prov.	Postal Code
Telephone (include area code)			
Apartment /Home Address (Number and Street-specify Road, Street, Cres., etc.)			

Current School		Grade	
Art Interests (check as many as apply)			
<input type="checkbox"/> Visual Arts <input type="checkbox"/> Drama <input type="checkbox"/> Music <input type="checkbox"/> Language Arts <input type="checkbox"/> Other, specify			

STUDENT'S SIGNATURE

DATE SIGNED

PARENT/GUARDIAN'S SIGNATURE

DATE SIGNED

EMAIL

OFFICE USE ONLY	Interview Date: _____	Time: _____
<input type="checkbox"/> Application Form <input type="checkbox"/> Release of Information <input type="checkbox"/> Report Card <input type="checkbox"/> Optional Attendance <input type="checkbox"/> Creative Writing		



Release of Information Form

TDSB is committed to creating an equitable school system where the achievement and well-being of every student is fostered through rich, culturally authentic learning experiences in diverse, accepting environments where all are included, every voice is heard, and every experience is honoured.

TDSB strives to meet the accommodation needs of persons with disabilities. Applicants are encouraged to make their needs for accommodation known in advance during the application process.

RELEASE OF INFORMATION FORM

Please include the signed RELEASE OF INFORMATION FORM with your application package. Your parent/guardians permission for the release of this information to the school is necessary before we can process this application.

STUDENT'S NAME (Please Print)	
Grade	Home School

PARENT/GUARDIAN'S SIGNATURE

DATE SIGNED

EMAIL

Transportation, including bussing and distribution of TTC tickets, is not included for specialized schools and programs.

Personal information contained on this form or general information collected on behalf of the Toronto District School Board regarding the student is collected under the authority of the Education Act and in compliance with sections 14, 31 and 32 of the Municipal Freedom of Information and Protection of Privacy Act and will be used for education, transportation and health and safety purposes. For further information, please contact Blakely.McAlister@tdsb.on.ca or call 416 395 3190.

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Optional Attendance Form

Application for a Secondary Program at a School Outside the Resident Area
(Includes Grade 9 program at Intermediate Schools)

1 Civic Centre Court, 1st Floor, Fax: 416-394-4970, Attention: Program Coordinator - Guidance, Career & Adolescent Development

Date: _____

Name of Requested Secondary School: <input type="text"/>	Requested Start Date: _____	
	For Grade : _____	Number of Credits presently earned: _____
Home or Sending School: <input type="text"/>	Does a sibling presently attend the requested school? Yes/No	
	If YES: Name of Sibling _____	

Parents please note: Transportation is not provided for Optional Attendance Students

Applicant's Information:

Student's Surname: _____ Given Names: _____ Birthdate: _____ (DD/MM/YY)

Student's Address: _____ Apt. # _____ Postal Code: _____

Telephone: _____ Present Grade/Class: _____ Student School I.D. Number: _____

Female Male Is the applicant under **Optional Attendance** at the present school? Yes/No

Parent/Guardian Information:

Parent/Guardian's Name: _____ Business Phone Number: _____

Applicant With Child: Child Care Information (Not applicable to all applicants)

If the Applicant's child receives Day Care, please indicate:

Name of Day Care: _____ Telephone of Day Care: _____

Address of Day Care: _____

Secondary Program Applications:

Specialized Programs/ Schools	Regular Programs/ Schools
1. _____	1. _____
2. _____	2. _____

Reasons for Applying/Other Considerations:

Conditions on the reverse of this form have been read and agreed to:

Parent/Guardian **Signature**: _____ Student **Signature** (18 years of age or older): _____

Current School Principal (or Designate) **Signature**: _____ Date: _____

For Office Use Only:

Requested School's Decision: Accepted Not Accepted

Signature of Requested School Principal: _____ Date: _____

Distribution: 1 copy: To Parent/Guardian when decision is made
1 copy: To TDSB Home or Sending School