

Student Registration Form – 2020-2021

| Office Use Only | | | |
|---------------------------------------|------------|--|--|
| School Division Student Number: | | | |
| Ministry of Education Student Number: | | | |
| French Immersion Program: | Home Room: | | |

| School: | | _ | | | |
|---|---|---|---------------------|------------------------------|--------------------|
| STUDENT PERSONAL IN Student's Legal Name: | NFORMATION Surnama | First Name | | M: 4.4 | le Name (s) |
| Usual First Name: | | | Gender: | Male Female Unspecifie | Grade: |
| House/Apt#: Stree | et: | City: | | | : |
| Mailing Address (if different from | above): | | | | |
| Land Location (For Rural Students | s): Quarter: Section | on: Township |): F | Range: | Meridian: |
| Home Phone: | Student Cell: _ | | | | |
| | | | | | |
| PARENT OR GUARDIAN Relationship: Father Step-father Name: Surname | Mother Guard Step-mother | PARENT OF Relationship: Name: | Fathe Step-fathe | er Mother Step-moth | her Guardia her |
| Does student live with you? Employer: | Yes No | Does student live Employer: | e with you? | Yes | No |
| Employer's Phone: | | | | | |
| Email: | | Email: | | | |
| | | | | | |
| CITIZENSHIP INFORMA Canadian Othe | TION or – please specify: | | Country o | f Birth: | |
| LANGUAGE SPOKEN First Language: | | Second Language: | | | |
| FIRST NATIONS INUIT A | AND MÉTIS (voluntary First Nations Non-Statu | | | Metis | |
| Do you live on a reserve: Reserve Name: | Yes No | Status #: House #: | Str | eet Name: | |
| CIDI INICC INICODALA DIO | N. (DI | | | | |
| SIBLINGS INFORMATIO Name: | _ | itional sheet to list n Date of Birth: | | | _ |
| Surname Name: | First Name | Date of Birth: | Mont | h/Day/Year | |

First Name

Surname

Month/Day/Year

| Name of School: | ase complete if the student is new to this school) Grade: | |
|--|--|--------|
| City/Town of School: | Phone: | |
| | | |
| Should school administration | by be designated as "Protected" if a court has issued a restraining order. In the aware of any such Court Order for the protection of your child? Yes Norments to discuss this situation with the school administration. In the aware of any such Court Order for the protection of your child? Yes Norments to discuss this situation with the school administration. In the aware of any such Court Order for the protection of your child? Yes Norments to discuss this situation with the school administration. In the aware of any such Court Order for the protection of your child? Yes Norments to discuss this situation with the school administration. In the aware of any such Court Order for the protection of your child? Yes Norments to discuss this situation with the school administration. In the aware of any such Court Order for the protection of your child? Yes Norments to discuss this situation with the school administration. In the aware of any such Court Order for the protection of your child? Yes Norments to discuss this situation with the school administration. In the aware of any such Court Order for the protection of your child? Yes Norments to discuss this situation with the school administration. In the aware of any such Court Order for the protection of your child? Yes Norments the aware of your child? Yes Norments the your child. Yes Norments the your child. Yes Norments the your child. Yes Norments t | ation. |
| | PRMATION Phone: | |
| EMERGENCY INFORMATION (| Parents/guardians will always be contacted first in the event of an emergen | cy) |
| Emergency Contact 1 (if parents are unavailable) | Name: Home Phone: | |
| Emergency Contact 2 | Work Phone: Cell: Name: Home Phone: | |
| (if parents and Emergency Contact 1 are unavailable) | Name: Home Phone: Work Phone: Cell: | |
| Does this student have a severe or life threa If you answered Yes, please provide details of | atening medical condition? Yes No of the medical condition: | |
| school hours away from the school gr educational objectives. The school will | ipate in low risk educational activities that occur during normal rounds. I understand that the activities will be connected to all inform me by written note or telephone call when a trip will | No |
| brochure. I give my permission for n video recording, and/or work to be disjuil be accessible to the public through publication of your child's picture in the | mation Protection (LAFOIP). Please read the LAFOIP my child's personal information (name, grade, school), photo, splayed beyond the school or school division and know that it a posting, publication, or internet website. (An example: The e local newspaper or social media.) school or online at www.srsd119.ca . (Click on Parent Information) | No |
| | rstood the information contained on the Student Registration Form and that the nderstand it is my responsibility to inform the school of any changes to the | |
| Date | Signature of Parent or Guardian | |