



Grande Prairie Public School District #2357 Registration Form

Last name (legal*): _____ Last name (used): _____

*Alberta Education requires the legal (birth certificate) name for all students

First name: _____ Middle name(s): _____ Preferred name: _____

Home Phone: _____ Birth Date: _____ Male: _____ Female: _____
(yy/mm/dd)

Student Address: _____ City: _____

Postal Code: _____ E-mail address: _____

(For Composite/Bridge only) Student living on his/her own: Yes _____ No _____

Previous School: _____ Last grade completed: _____

School's Address: _____

Phone: _____ Fax: _____ E-mail: _____

Father/Guardian

Last Name: _____ First Name: _____ Relationship to Student: _____

Living with Student: Yes: ___ No: ___ Address (if different than student): _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email: _____

Mother/Guardian

Last Name: _____ First Name: _____ Relationship to Student: _____

Living with Student: Yes: ___ No: ___ Address (if different than student): _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email: _____

Emergency Contact

Last Name: _____ First Name: _____ Relationship to Student: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Living with Student: Yes: ___ No: ___

FOR OFFICE USE ONLY

AB Learning #: _____ Home Form: _____ Admission Date: _____ Admin. Code: _____

Grade: _____ Teacher name: _____ EC AM: _____ EC PM: _____ EC Full Day: _____

Program: _____ Fees Paid: _____ Receipt #: _____

Bus Pass #: _____ Eligible: Yes _____ No _____ Birth Certificate: Yes _____ No _____

Hall Lock #: _____ Medical Alert: Yes _____ No _____ Initial: _____

Cum Record Requested: Yes _____ No _____ Leave Date: _____

I. GENERAL INFORMATION

Alberta Health Care Number: _____

Medical Problems, any special family circumstances, or any other pertinent information the school should know:

Please describe any special educational supports or services your child has had that the school should know:

Child Custody Agreement: Yes ____ No ____

If yes, please explain and provide the necessary documents. (i.e. court order) _____

II. RELIGIOUS AFFILIATION

Are both parents/guardians of Roman Catholic faith? Yes _____ No

Other religious affiliations that you wish to declare: _____

III. CITIZENSHIP INFORMATION

Canadian Citizen: _____ Perm Res/Landed Immigrant: _____ Student Authorization: _____

(Birth certificate or Citizenship papers needed) (Landed Immigrant Papers needed) (Visa needed)

Child of Canadian Citizen: _____ Child of Temp/Perm Resident: _____

IV. ABORIGINAL STATUS (If you wish to declare that you are an Aboriginal Person, please specify)

Status Indian/First Nations: _____ Non-Status Indian/First nations: _____ Métis: _____ Inuit: _____

Alberta Learning is collecting this personal information pursuant to section 33 (c) of the FOIP Act as the information relates directly to and is necessary to meet its mandate and responsibilities to measure system effectiveness over time and develop policies, programs and services to improve Aboriginal learner success. For further information or if you have questions regarding the collection activity, please contact the office of the Director, Aboriginal Policy, Policy Sector, Information and Strategic Services Division, Alberta Learning, 10155-1 02 St. Edmonton, AB, T5J 4L5, (780) 427-8501.

I declare that all the information on this form is, to the best of my knowledge, accurate.
I agree to inform authorities at school, in writing, if changes to this information should occur.
Signature: _____ Date: _____

Freedom of Information and Protection of Privacy Act (FOIP Act)
Collection of personal information (s.33 FOIP Act)

The information collected on the Student Registration Form is personal information as referred to in the FOIP Act. It is collected as per the School Act and section 32(c) of the FOIP Act. The Grande Prairie Public School District #2357 believes this information is necessary and relates directly to our obligation to provide students with: an education program that meets their needs and the provision of a safe and secure school environment.

The Grande Prairie Public School District #2357 believes that the uses of personal information as listed below provide a vital, healthy, functioning school where participation of all students is important and encouraged:

- ◆ the use of students' names, photos and comments, in the school calendar, newsletter, yearbook, graduation book, district or school website or other school publications
- ◆ the taking of individual, class, team or club photos for school purposes
- ◆ the use of students' names on artwork, other creative work, material of students, displayed at school or school board sites, or at a school or school board sponsored display in the community
- ◆ the use of students' names on honour rolls, student lists, graduation ceremonies, scholarship or other awards within the school or school district.
- ◆ the use of students' names and academic information necessary for determining eligibility or suitability for provincial, federal or other types of awards or scholarships in the event the board applies on a student's behalf.
- ◆ the use of students' names, related contact information and telephone numbers for absenteeism verification.
- ◆ the use of students' names, addresses, grades, age, contact information, telephone numbers by the Peace Country Health Authority for immunization and health screening purposes.

I am aware and agree with the above.

(Parent/guardian signature)

There are occasions where photos are taken of students at school or school sponsored activities by media, for publication, where students are not identified by name, such as: photographs or videos of students on the play ground, taking part in a music or sporting event or simply watching an event, etc. I grant permission to the Grande Prairie Public School District #2357 to allow my child's picture to be used in the above manner.

(Parent/guardian signature)

If the media wishes to identify your child by name you will be contacted for your consent before the picture or article is published.

FOIP legislation recognizes that work produced by students at school is the property of the student. There are many occasions at school where it is advantageous to record, display or reproduce student work, such as: taping student's oral class presentations, displaying student work in the school or at school sponsored events or reproducing student's work for educational or promotional reasons, etc.

I grant permission to the Grande Prairie Public School District #2357 to use my child's work for non-profit educational purposes as outlined above.

(Parent/guardian signature)

Signed this _____ day of _____, 20____, on behalf of (list children):

If you have any questions or concerns regarding the collection of this information and the intended purposes, please contact the Principal at your school, or the FOIP Coordinator for the Grande Prairie Public School District #2357, 10213 - 99th Street, phone 532-4491.

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Grande Prairie Public School District #2357
Section 23 Francophone Education Eligibility Declaration

Citizens of Canada

- whose first language learned and still understood is French; or
- who have received their primary school instruction in Canada in French have the right to have their children receive primary and secondary instruction in French; or
- of whom any child has received or is receiving primary or secondary school instruction in French in Canada, have the right to have all their children receive primary and secondary school instruction in the same language.

In Alberta, parents can only exercise this right by enrolling their child in a French first language (Francophone) program offered by a Francophone Regional authority.

A. According to the criteria above as set out in the *Canadian Charter of Rights and Freedoms*, are you eligible to have your child receive a French first language (Francophone) education? (Please place an X in the appropriate box.)

No Yes Do not know

B. Do you wish to exercise your Section 23 rights to have your child receive a French first language (Francophone) education?

No Yes

If yes, please contact École Nouvelle Frontière, 10807 – 101 rue, Grande Prairie,
(780) 814-7945 to enroll your child.

Name of Student: _____ Grade: _____
(Please print)

Name of Parent/Guardian:

_____ Date: _____
(Please print) (Signature)

Please note that this information must be kept in the student's record

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HEALTH HISTORY FORM

I hereby consent to the release of my child (ren)'s health/immunization records to Peace Country Health, Public Health Centre.

Date: _____ Signature of Parent(s) or Legal Guardian(s): _____

To assist the Public Health Centre in locating and requesting your child(ren)'s health/immunization records, please fill in the following information and return the completed form to the school or your local Public Health Centre.

Student's full name:		Birth date:		M or F	
School:		Grade/class:		Personal Health #:	
Mother/Guardian:		Phone (work):			
Father/Guardian:		Phone (work):			
Mailing address:		Phone (home):			
Siblings: Full Names		Birth date		School	Grade/Class

PLEASE INCLUDE ANY OTHER NAMES THE FAMILY OR CHILD MAY HAVE USED:

Please list in order, all the places you have lived in the past three years, starting with the most recent (if you already have copies of your child(ren)'s Health Record, please contact your local Public Health Centre).

Town/City, Province, Country	School Attended (or nearest Public Health Centre if preschool)
1.	
2.	
3.	

Please fill out the following section so we can update your child(ren)'s Health Record when we receive it.

Childhood Illnesses (check if child had)	Date	Special Health Conditions
Chicken Pox? _____		Heart:
Red Measles (medically confirmed?) _____		Diabetes
Allergies (include associated reaction)		Asthma:
		Convulsions:
		Head Injury:
		Other:

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