

STUDENT INFORMATION

Legal Name: _____
Last First Middle Usual Name if different

Address: _____
Street City Postal Code

Date of Birth: _____ Place of Birth: _____
(MM-DD-YYYY) City Country

Gender: M F O Birth Certificate provided: Y N

Last School Attended: _____
School Name City

First Language Spoken: _____ Language Most Used: _____

ABORIGINAL ANCESTRY: Yes* No (*Ancestry is self-declared, documentation not required)

STATUS: On Reserve Off Reserve (Band Name: _____) Metis Inuit Non-Status (Not registered with a band)

PARENT/GUARDIAN INFORMATION:

Parent #1 Name: _____ Relationship: _____ Home Phone: _____

E-mail: _____ Cell Phone: _____

Place of Employment: _____ Work Phone: _____

- Can pick up student? Receive email Address if not living with student: _____
- Willing to volunteer? _____
- Lives with student - Details: _____

Parent #2 Name: _____ Relationship: _____ Home Phone: _____

E-mail: _____ Cell Phone: _____

Place of Employment: _____ Work Phone: _____

- Can pick up student? Receive email Address if not living with student: _____
- Willing to volunteer? _____
- Lives with student - Details: _____

Parent #3 Name: _____ Relationship: _____ Home Phone: _____

E-mail: _____ Cell Phone: _____

Place of Employment: _____ Work Phone: _____

- Can pick up student? Receive email Address if not living with student: _____
- Willing to volunteer? _____
- Lives with student - Details: _____

Parent #4 Name: _____ Relationship: _____ Home Phone: _____

E-mail: _____ Cell Phone: _____

Place of Employment: _____ Work Phone: _____

- Can pick up student? Receive email Address if not living with student: _____
- Willing to volunteer? _____
- Lives with student - Details: _____

PARENT INVOLVEMENT IN SCHOOL: Our policy is to encourage involvement of a child's parents in their education. It is the registering parent's responsibility to ensure that the parent/guardian information section of the registration form is complete and accurate. If legal papers and/or court documents exist regarding custody, guardianship or limitations placed in the involvement of one parent please be sure to submit a copy with the registration form. If concerns exist regarding the involvement of a parent, please inform the administration.

Court Order or other legal documents pertaining to custody in effect? Yes No Copy provided to school? Yes No

Who has custody: _____

SIBLINGS INFORMATION:

Legal Name: _____ Usual Name: _____ DOB: _____ School: _____

Legal Name: _____ Usual Name: _____ DOB: _____ School: _____

EMERGENCY CONTACT INFORMATION: In an emergency (earthquake, illness or accident, impassable bridges), the school requires the name and phone number of at least two contacts that your child may be released to when the guardian is not available. List in order they are to be called.

Name: _____ Home: _____ Work: _____

Cell: _____ Relationship: _____

Name: _____ Home: _____ Work: _____

Cell: _____ Relationship: _____

Name: _____ Home: _____ Work: _____

Cell: _____ Relationship: _____

Name: _____ Home: _____ Work: _____

Cell: _____ Relationship: _____

MEDICAL INFORMATION:

Medical Alerts: (allergies, conditions, etc.) _____ Care Card No.: _____

LEARNING NEEDS: (Learning Assistance; Modified Program, etc.) _____

Parent Signature _____

OFFICE USE ONLY		Copy of Address Document <input type="checkbox"/>	
Student No _____	Div(AG) No. _____	Teacher: _____	X-Boundary _____
Registration Date _____	(First Day of Attendance)	STUDENT RECORDS: Requested <input type="checkbox"/> Received <input type="checkbox"/>	