Northwest School Division #203

Laying the Foundation for Success ... One Student at a Time

STUDENT REGISTRATION FORM

Before a student can be admitted by a school, a student registration form must be completed in its entirety. Information acquired through this form is kept secure and access is restricted.

Entrance Requirements

- Children must be 5 for Kindergarten and 6 for grade one on or before December 31st of the current year.
- **Proof of age is required (photocopy of Birth Certificate).**

  ☐ **Staff member verified Birth Certificate information**
- **Has your child ever attended a Saskatchewan school?**
  ☐ **YES** ☐ **NO**

  If yes, please list the last Saskatchewan school and community:

  _____

  _____

Office Use Only

Ministry of Ed. Student Number

School

Home Room Teacher

School Bus Driver

Student Personal Information

Legal Name: Surname First Name Middle Name(s) Usual First Name

Date of Birth: Month / Day / Year Gender: ☐ Female ☐ Male ☐ Undeclared Grade:

Home Phone: Cell Phone: Email:

Mailing Address: City: Postal Code:

Land Location or Street Address:

Kindergarten Options *(Meadow Lake only)*: ☐ English ☐ Michif

Parent/Guardian Information *(at same address as student)*

Relationship: ☐ Father ☐ Mother ☐ Guardian ☐ Step-father ☐ Step-mother

Name: Surname First Name

Employer: Work Phone:

Cell Phone: Email:

Relationship: ☐ Father ☐ Mother ☐ Guardian ☐ Step-father ☐ Step-mother

Name: Surname First Name

Employer: Work Phone:

Cell Phone: Email:

Emergency Information *(Parents will always be contacted first in the event of an emergency)*

Emergency Contact 1 - Name: Home Phone:

Work Phone: Cell Phone:

Emergency Contact 2 - Name: Home Phone:

Work Phone: Cell Phone:

In Town Billet Information: *A billet is an alternate home your child can go to if the school is closed due to an emergency or if school buses are unable to transport your child home.*

Name: Home Phone: Cell Phone:

Family Doctor: Doctor's Phone:

Saskatchewan Personal Health No.:

Does this student have a severe or life threatening medical condition? ☐ Yes ☐ No

If you answered YES, please provide details of the medical condition on a separate sheet.

Are there any serious medical conditions you want the school to be aware of? Please indicate.

☐ Diabetes ☐ Hemophilia ☐ Asthma On Asthma Medication: ☐ Yes ☐ No

☐ Epilepsy ☐ Heart Condition Allergies: ☐ Mild ☐ Medium ☐ Severe

☐ Other:

Additional Supports *Please indicate*

Has your child been receiving additional supports: ☐ Physiotherapy ☐ Occupational Therapy

☐ Inclusion and Intervention Plan ☐ Kinsmen Child Centre ☐ Speech-Language Services

Transportation *(If riding a bus)*

Bus Route: Driver Name:



CONFIDENTIAL SELF-DECLARATION FORM

Northwest School Division #203

Dear Parents and Guardians,

Our school division is working to build a better process of self-declaration for all students. You can choose to declare your children as First Nations, Métis or Inuit. We are asking for your support for this initiative. Please review, fill out and return the attached form to your child's school.

The data collected will be used by the Ministry of Education and our school division to help improve student achievement. It will be securely stored in strict confidence and only a limited number of Ministry and division staff members will have access to it.

Proof of documentation isn't required for declaration, but students under 19 do need parental consent. Please see the attached form and contact us with any questions. Declaration is a voluntary and confidential process and parents or guardians can revoke declaration at any point with a signed letter.

Thank you,

Jennifer Williamson
Director of Education

"Indigenous peoples" is a collective name for original peoples of North America and their descendants. The Canadian constitution recognizes three distinct groups – First Nations, Métis and Inuit. Please check the box that best identifies your child:

Student Name: _____

School: _____

Grade: _____

Home Address: _____

Parent / Guardian; _____

Signature: _____

I have read this information.

Optional: Band name: _____

Status #: _____

- ☐ First Nations / Registered / Treaty / Status – refers to an individual recognized by the federal government as being registered under The Indian Act
- ☐ First Nations / Non-Registered / Non-Status – refers to a First Nations person who is not registered under The Indian Act
- ☐ Métis – refers to a person of mixed First Nations and European ancestry who identifies as Métis, as distinct from First Nations, Inuit or non-Aboriginal
- ☐ Inuit – refers to a person who identifies as Inuit, as distinct from First Nations, Métis or non-Aboriginal
- ☐ Non-applicable



Transportation Requirements *(Transportation requests from a secondary address or First Nations land must be completed annually)*

Does your student require transportation from:

☐ Home Residence ☐ Other Location *(daycare, custody arrangement)* ☐ First Nations Land

Last School Attended

Name of School: Grade: Teacher:

Address of School: City or Town Telephone:

Custody Information *(School be sure to flag)*

Court Order: In rare instances a child may be designated as 'Protected' if a court has issued a restraining order.
Should school administration be aware of any such Court Order for the protection of your child? ☐ Yes ☐ No

If you answered YES, please make arrangements to discuss this situation with the school administration.
You will need to supply legal documentation.

Foster Care: Is this student in foster care? ☐ Yes ☐ No If you answered YES, please provide the following information:

Foster Care Agency: ☐ Ministry of Social Services ☐ ICFS (Indian Child and Family Services)

Type of Foster Care: ☐ Regular ☐ Therapeutic ☐ Therapeutic Group

Social Worker's Name: Phone:

Citizenship Information *Please indicate*

☐ Canadian ☐ Permanent Resident ☐ Refugee ☐ Student/Visitor Visa ☐ Temporary Resident

Country of Birth: Date moved to Canada: Month / Day / Year

Language Information

Lanuguage spoken in the home (if other than English):

Students considered 'English as an Additional Language' must complete the EAL Form. Proficiency Level:

Sibling Information *(Please attach an additional sheet to list more than three siblings)*

Name: Surname First Name Date of Birth: Month / Day / Year School:

Name: Surname First Name Date of Birth: Month / Day / Year School:

Name: Surname First Name Date of Birth: Month / Day / Year School:

Speech & Language Screening - Pre-Kindergarten & Kindergarten ONLY

I give consent for the NWSD speech-language pathologist to complete a 10-minute speech, language, and/or hearing screen with my child. If any further assessment or interventions are suggested, guardian(s) will be contacted by the speech-language pathologist or student support services teacher. ☐ Yes ☐ No

Parent/Guardian Verification

I hereby declare that I have read and understood the information contained on this Student Registration Form and that the information I have provided is correct. I understand it is my responsibility to inform the school of any changes to the information contained on this form.

Signature: Date:

Freedom of Information and Protection of Privacy *Release Form*

The Saskatchewan Government Local Authority Freedom of Information and Protection of Privacy Act (LAFOIP) requires the school to seek permission from parents and guardians for the disclosure of students' personal information.

During the school year students may, with your permission, have their first name, photograph, school work, video, audio, presentations, and other works displayed in the school or published in print or digital materials - including, but not limited to: newsletters, social media (Facebook/Twitter/Instagram/Youtube), school website, brochures, etc. This means that your son/daughter's first name and/or image would be available to the general public.

Permission to release such information must be obtained from parents of students under 18 years of age.

Permission for Northwest School Division

I grant permission for the Northwest School Division to use my child's image or work (as explained above) for any lawful purpose, including for example, such purposes as publicity, illustration, advertising and web content - including, but not limited to: newsletters, social media (Facebook/Twitter/Instagram/Youtube), school website, brochures, etc. - without remuneration, salary or stipend.

☐ I agree ☐ I do not agree Please list any exceptions:

Permission for Media

I give permission for Northwest School Division to allow **authorized** members of the media to photograph, interview, and/or video-tape my child in connection with school events or activities.

☐ I agree ☐ I do not agree

Name of Student: School:

Parent or Guardian's Name:

Parent or Guardian's Signature: Date:

Computer Network Acceptable Use Policy

The school provides a networked computer system, including access to the Internet, to promote educational excellence, to increase alternate sources of information, to promote resource sharing, to further innovation in instruction and communication, and to prepare students for the future. The Acceptable Use Policy governs students use of this computer system. A copy of the policy is available on the website.

As the parent or guardian of this student, I have read the Acceptable Use Agreement. I understand that this Internet/Network access is designed for educational purposes. I support the division's standards for my child to follow when selecting, sharing, or exploring information on the Internet/Network. I recognize that some controversial materials exist on the Internet. I will not hold the school division responsible for materials acquired on the Internet. I hereby give permission for my child to use the Internet at school.

Parent or Guardian's Name:

Parent or Guardian's Signature: Date:

SchoolCash Online Registration *For students who have not yet registered.*