

FOR STUDENTS REGISTERING UNDER AN EDUCATION SERVICES AGREEMENT

The information requested on this form is being collected pursuant to the provisions of the School Act and its regulations, and the FOIP Act, Sections 33(c), 39 (1)(b) and 40 (1)(c). Information acquired through this form is kept secure and access is restricted.

All items within a dark line border are to be completed by school office staff.

School ID#

School: **Camilla School**

Date of Registration: _____ Program Placement: _____

Legal Last Name: _____ Birth Date: _____

Legal First Name _____ Gender: Female Male Grade: _____

Legal Middle Name(s): _____

Is transportation required? Yes No

If student does not normally go by their legal name, indicate:

Preferred Surname: _____

Preferred First Name: _____

Mailing Address: _____

911 (Physical) Address: _____

Subdivision: _____

Home Phone No. () _____

Name and Location of Previous School:

Has this student ever attended a school in Sturgeon

School Division: Yes No

If yes, name of school: _____

Vital Statistics Document Verification

Legal Name Verified Document: _____

Citizenship Verified Document: _____

Date of Birth Verified Document: _____

NOTE: A Vital Statistics Document must be presented to the school **within four weeks of registration** to verify the student's legal name, citizenship and birth date.

Vital Statistics Documents include: Canadian Birth Certificate, Canadian Citizenship Certificate, Canadian Adoption Certificate, Canadian Marriage Certificate, Passport, Visa, or Permanent or Landed Immigrant/Residence Document.



"...where great things are happening"

Legal Guardian Information

1. Father Mother
Guardian

Other (please specify):

Mr. Mrs. Ms. Miss
Dr.

Last
Name: _____

First
Name: _____

Address: _____

2. Father Mother
Guardian

Other (please specify):

Mr. Mrs. Ms. Miss
Dr.

Last
Name: _____

First
Name: _____

Address: _____

STUDENT LIVES WITH:

Both Parents Mother only Father only Guardian

CHILDREN SERVICES INFORMATION:

Guardianship Order: Permanent Temporary

Other _____

Legal Signing Authority _____

Medical/Emergency Contact Information

Emergency Contact Information:

In case of illness, inclement weather or emergency school closure and the student's parent/legal guardian is not available, please indicate alternate emergency contacts:

Name: _____

Phone: _____
Daytime/Work

Name: _____

Student's Medical Information:

Does this student have any medical concerns/special needs/family circumstances of which the school should be aware?

Yes No

If YES, please describe: _____

Alberta Health Care Number _____

Parents are not required to provide this information, however Alberta Health

Custody/Court Order Information:

Code the student with a “yes” if the following applies:

In rare instances a child may be designated as “Protected” if a court has issued a restraining order under the Child Welfare Act, The Domestic Relation Act, The Divorce Act or the Young Offenders Act.

Please indicate if the school administration should be aware of any such court order for the protection of your child.

Yes No

If YES, please make arrangements to discuss this situation with the school administration. You will be expected to provide legal documentation to support your requests.

Alberta Education Grant Code Information

Aboriginal Learner Data Collection Initiative (ALDCI):

If you wish to declare that you are an Aboriginal person, please specify:

Status Indian/First Nations Non-Status Indian/First Nations

For further information, please refer to:

www.education.alberta.ca/system-supports/results-reporting or contact Alberta Education at 780-427-8501.

If you have questions regarding the collection activity by Sturgeon School

English as Second Language (ESL) Eligibility:

ESL Students can be Canadian-born or Foreign-born.

Is your child Canadian born or Foreign-born?

If Foreign-born - Birth Country:

Student's first language learned (specify):

Student's primary home language (specify):

Citizenship (check one)

AB ED Code:

- 1 Canadian citizen
- 2 Permanent resident
- 5 Temporary Resident (student)
(e.g. Study Permit or visiting student)
- 6 Child of Canadian Citizen
(student is not a Canadian citizen)
- 7 Child of an individual lawfully admitted to
Canada for permanent or temporary
residence.
- 9 Step-child of a Canadian or Temporary
Foreign Worker

Special Needs/Schooling

Has your child received specialized services or programming? Yes

Section 23 Francophone Education Eligibility Declaration:

Pursuant to Section 10 of the *School Act* and Section 23 of the *Canadian Charter of Rights and Freedoms*:

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

Non Resident

Please check(✓)

Resident Board :

1. Under an Educational Services Agreement, students must attend school a minimum of 80% of the school year. Attendance will be evaluated in each semester at High School and annually at K to 9 schools. Only students conforming to attendance stipulations will qualify to attend the next semester at High School and the next year at K to 9 schools in Sturgeon School Division.
2. Extenuating circumstances regarding absences will be considered in collaboration with family, the resident School Board and Sturgeon School Division.

Declaration and Consent

I hereby affirm that I have read this registration form and the accompanying Student Information Booklet and understand how this information will be used. I affirm that the information given on this registration form is complete and correct. As indicated by my signature below, I hereby freely and voluntarily consent to have the information provided by me accessible as indicated.

Signature of Parent/Legal Guardian/Independent Student

Date

If you have any questions related to the information on this form, please feel free to contact the school office.