



# 2019-2020

## STUDENT REGISTRATION FORM

**PLEASE RETURN COMPLETED REGISTRATION FORM TO YOUR SCHOOL.**  
**THE FORM MUST BE SIGNED BY THE PARENT OR GUARDIAN OR BY THE STUDENT (IF LIVING INDEPENDENTLY)**

The information requested on this form is being collected pursuant to the *School Act (Student Record Regulation)*, the *Freedom of Information and Protection of Privacy (FOIP) Act*, and the *Canadian Charter of Rights and Freedoms, Section 23*. Information acquired through this form is kept secure and access is restricted. If you have any questions regarding the collection or use of this information, please contact your school principal or the FOIP Coordinator, Rocky View Schools, 2651 Chinook Winds Drive, Airdrie, Alberta T4B 0B4 or phone 403.945.4013. **For all other inquiries, call 403.945.4000.**

**SCHOOL OFFICE USE ONLY:**

SCHOOL:		HOME ROOM:	
ENTRY CODE:	ENTRY DATE: ____/____/____ MONTH DAY YEAR	ALBERTA EDUCATION #:	SCHOOL ID #:

**STUDENT INFORMATION**

Required - Proof of the child's age and legal name. Documents accepted are: birth certificate, adoption certificate, student authorization visa, Canadian citizenship papers, or permanent landed immigrant/residence documentation. Proof of child's address. Documents accepted are: utility bill, bill of sale or lease agreement.

LEGAL LAST NAME:		LEGAL FIRST NAME:		LEGAL MIDDLE NAME:	
PREFERRED LAST NAME:		PREFERRED FIRST NAME:			
RESIDENCE ADDRESS: APT: HOUSE : STREET: (or Rural 911 ADDRESS):			CITY:		POSTAL CODE:
MAILING ADDRESS (IF DIFFERENT FROM ABOVE):			CITY:		POSTAL CODE:
HOME TELEPHONE:	BIRTH DATE: ____/____/____ MONTH DAY YEAR		MALE <input type="checkbox"/>	FEMALE <input type="checkbox"/>	ENTERING GRADE:

**CITIZENSHIP/ IMMIGRATION STATUS**

CANADIAN CITIZEN: **YES**  A copy of the student's birth certificate is required. **NO**  If so, complete the following section.

BIRTH COUNTRY, IF NOT CANADA:	OFFICE USE ONLY
<input type="checkbox"/> Temporary Resident (student has a study permit and living under the care of a legal guardian). Non-refundable registration fee and International Fees apply. Student Visa Expiry Date: MONTH ____/ DAY ____/ YEAR ____	CITIZENSHIP CODE: <b>5</b> ENROLLMENT CODES: IN CANADA: <b>415</b> OUTSIDE CANADA: <b>416</b>
<input type="checkbox"/> A child lawfully admitted to Canada for permanent residence; must present a Confirmation of Permanent Residence.	CITIZENSHIP CODE: <b>2</b>
<input type="checkbox"/> A child living in Canada, with a biological or adopted parent who is a Canadian Citizen. Proof of parent's Canadian birth certificate or Canadian Citizenship documents.	CITIZENSHIP CODE: <b>6</b>
<input type="checkbox"/> A child living in Canada, with a biological or adopted parent who has Landed Immigrant Status or Study Permit or Work Visa. Proof of parent and children's documentation is required.	CITIZENSHIP CODE: <b>7</b>
<input type="checkbox"/> A step-child of a Canadian; student presents passport and study permit. Biological or adopted parent provides passport and proof of application for permanent residency and fee payment to Citizenship and Immigration Canada.	CITIZENSHIP CODE: <b>9</b> ENROLLMENT CODE: <b>417</b>
<input type="checkbox"/> A step-child of a Temporary Foreign Worker; student presents passport and study permit. Biological or adopted parent provides passport; step-parent provides passport and work permit.	CITIZENSHIP CODE: <b>9</b> ENROLLMENT CODE: <b>418</b>
<b>EXCHANGE STUDENT</b> - involved in an approved reciprocal exchange program (does not include Rotary exchanges)	
<input type="checkbox"/> A student from another province or territory in Canada	ENROLLMENT CODE: <b>412</b>
<input type="checkbox"/> A student from outside Canada	ENROLLMENT CODE: <b>413</b>

**SCHOOL AT WHICH STUDENT IS REGISTERING**

NAME OF SCHOOL:

ENTERING GRADE:

Selected RVS schools offer a K-12 French Immersion Program. Are you registering in French Immersion? Yes  No Selected RVS schools offer a Christian Program. Are you registering in a Christian Program? Yes  No **KINDERGARTEN**

Kindergarten is a **half-day program** at most RVS schools; the exception is at Indus School, Westbrook School, Kathryn School, and Cochrane Christian Academy, where it is a **full-day program** for a portion of each week.

To help place your student in those schools with AM and PM options, please share any personal circumstances that you believe are relevant.

**LAST SCHOOL ATTENDED**

NAME OF SCHOOL:

GRADE:

WITHDRAWAL DATE:

 \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 MONTH DAY YEAR

Please provide the following information if not advancing from another school in RVS.

ADDRESS:

CITY:

PHONE:

PROVINCE:

POSTAL CODE:

FAX:

Reason for leaving last school:

Has the student been assigned an Individual Program Plan (IPP) or Personal Learning Plan (PLP)? Yes  No **MEDICAL INFORMATION****STUDENTS WITH A STUDENT VISA MUST REGISTER WITH THE ALBERTA HEALTH CARE INSURANCE PLAN WITHIN THREE MONTHS OF ARRIVAL.**

ALBERTA HEALTH CARE NUMBER:

ALLERGIES:

SPECIAL MEDICAL CONDITIONS (i.e. medications, dietary restrictions, physical disabilities, mental health or behavior disabilities, etc.):

**INDEPENDENT STUDENT STATUS**

The *School Act* defines an independent student as someone who is 18 years of age or older or 16 years of age and living independently or who is party to an agreement under 57.2 of the *Child Youth and Family Enhancement Act*. Independent students may complete this form and register in Rocky View Schools without parental consent.

Are you claiming 'Independent Student' status as defined in the *School Act*? Yes  No

**GUARDIANSHIP RIGHTS, CUSTODY OR ACCESS RIGHTS**

Guardians of the student must be identified to ensure the rights of each party are respected. A child may be designated as "Protected" if a court has issued an order under the *Child Welfare Act*, the *Domestic Relations Act*, the *Divorce Act*, the *Protection Against Family Violence Act*, or the *Young Offenders Act*, or is the subject of a custody or access order including but not limited to parenting order under the *Child, Youth, and Family Enhancement Act* that is a predecessor to or a substitute for any of the said Acts. If your child is subject to any such order or agreement, please indicate below and discuss this situation with the school administration. If an order exists affecting guardianship rights or custody or access rights, a copy of the order or agreement will be required for the student's record.

Does such an order exist? Yes  No

If yes, please attach the most current order to this registration form.

**BIOLOGICAL OR ADOPTIVE PARENT/LEGAL GUARDIAN INFORMATION (CONSULT THE FAMILY LAW ACT FOR GUARDIANSHIP INFORMATION)**

It is important to fill out information for each biological or adoptive parent or legal guardian, whether or not they are living together. Information is collected to ensure communications are directed to the appropriate address. **All legal guardians must submit documentation of their legal rights.**

<b>CONTACT ONE</b> BIOLOGICAL OR ADOPTIVE MOTHER <input type="checkbox"/>		LIVES WITH STUDENT: YES <input type="checkbox"/> NO <input type="checkbox"/>		MAIL TO: YES <input type="checkbox"/> NO <input type="checkbox"/>	
BIOLOGICAL OR ADOPTIVE FATHER <input type="checkbox"/> LEGAL GUARDIAN <input type="checkbox"/>					
(CHECK ONE)					
LAST NAME:		FIRST NAME:			
HOME PHONE:	WORK PHONE:	CELL PHONE:	EMAIL ADDRESS:		
RESIDENCE ADDRESS:		CITY:		POSTAL CODE:	
MAILING ADDRESS (IF DIFFERENT FROM ABOVE):		CITY:		POSTAL CODE:	
<b>CONTACT TWO</b> BIOLOGICAL OR ADOPTIVE MOTHER <input type="checkbox"/>		LIVES WITH STUDENT: YES <input type="checkbox"/> NO <input type="checkbox"/>		MAIL TO: YES <input type="checkbox"/> NO <input type="checkbox"/>	
BIOLOGICAL OR ADOPTIVE FATHER <input type="checkbox"/> LEGAL GUARDIAN <input type="checkbox"/>					
(CHECK ONE)					
LAST NAME:		FIRST NAME:			
HOME PHONE:	WORK PHONE:	CELL PHONE:	EMAIL ADDRESS:		
RESIDENCE ADDRESS:		CITY:		POSTAL CODE:	
MAILING ADDRESS (IF DIFFERENT FROM ABOVE):		CITY:		POSTAL CODE:	

<b>CONTACT 3 (OPTIONAL)</b>			
LAST NAME:		FIRST NAME:	
RELATIONSHIP TO STUDENT: STEP MOTHER <input type="checkbox"/> STEP FATHER <input type="checkbox"/> OTHER (PLEASE SPECIFY)			
HOME PHONE:	WORK PHONE:	CELL PHONE:	EMAIL ADDRESS:
RESIDENCE ADDRESS:		CITY:	POSTAL CODE:
MAILING ADDRESS (IF DIFFERENT FROM ABOVE):		CITY:	POSTAL CODE:
<b>CONTACT 4 (OPTIONAL)</b>			
LAST NAME:		FIRST NAME:	
RELATIONSHIP TO STUDENT: STEP MOTHER <input type="checkbox"/> STEP FATHER <input type="checkbox"/> OTHER (PLEASE SPECIFY)			
HOME PHONE:	WORK PHONE:	CELL PHONE:	EMAIL ADDRESS:
RESIDENCE ADDRESS:		CITY:	POSTAL CODE:
MAILING ADDRESS (IF DIFFERENT FROM ABOVE):		CITY:	POSTAL CODE:
<b>SIBLING INFORMATION (OPTIONAL)</b>			
The provision of sibling information is optional and is collected for communication purposes.			
Do you have other children attending RVS? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, please list name(s), school(s) and grade(s).			
NAME:	SCHOOL ATTENDING:	GRADE:	
NAME:	SCHOOL ATTENDING:	GRADE:	
NAME:	SCHOOL ATTENDING:	GRADE:	
NAME:	SCHOOL ATTENDING:	GRADE:	

**CONTACT IN CASE OF EMERGENCY OR SCHOOL CLOSURE**

An 'emergency contact' is someone other than the student's biological or adoptive parent or legal guardian. Please provide emergency contacts to be used in the event that school personnel cannot contact those listed as biological or adoptive parent or legal guardian.

NAME	PHONE #	CELL #	RELATIONSHIP TO STUDENT
			GRANDMOTHER <input type="checkbox"/> GRANDFATHER <input type="checkbox"/> SISTER <input type="checkbox"/> BROTHER <input type="checkbox"/> AUNT <input type="checkbox"/> UNCLE <input type="checkbox"/> FRIEND <input type="checkbox"/> OTHER (PLEASE SPECIFY)
			GRANDMOTHER <input type="checkbox"/> GRANDFATHER <input type="checkbox"/> SISTER <input type="checkbox"/> BROTHER <input type="checkbox"/> AUNT <input type="checkbox"/> UNCLE <input type="checkbox"/> FRIEND <input type="checkbox"/> OTHER (PLEASE SPECIFY)
			GRANDMOTHER <input type="checkbox"/> GRANDFATHER <input type="checkbox"/> SISTER <input type="checkbox"/> BROTHER <input type="checkbox"/> AUNT <input type="checkbox"/> UNCLE <input type="checkbox"/> FRIEND <input type="checkbox"/> OTHER (PLEASE SPECIFY)

**CHILD CARE PROVIDER** (if applicable)

NAME OF FACILITY:

CONTACT NAME:

WORK PHONE:

CELL PHONE:

ADDRESS:

CITY:

POSTAL CODE:

**STUDENT NAME:****GRADE:****FRANCOPHONE ELIGIBILITY**

According to the *Education Act* and Section 23 of the *Canadian Charter of Rights and Freedoms*, a parent who is a Canadian Citizen has the right to have all his/her children receive primary and secondary instruction in French if:

1. Either parent's first language learned and still understood is French (*mother or father's native tongue is French*) or,
2. Either parent received their primary school instruction in Canada at a Francophone school (K-12), or,
3. Any child in the same family has received or is receiving primary or secondary school instruction at a Francophone school in Canada.

**Note:** Francophone eligibility rights are not multi-generational and refer only to the native tongue of the parent(s).

Do you claim entitlement to a Francophone education under the terms of the *Education Act*? Yes  No

If YES, RVS is required to release demographic information about the student to the local Francophone Education Board upon written request from that school jurisdiction in conformance with provincial Student Record Regulations.

**ENGLISH AS A SECOND LANGUAGE (ESL)**

A student may be eligible for ESL support when the primary language spoken at home is a language other than English.

Is your child's primary language English? Yes  No

If NO, my child's primary language is: \_\_\_\_\_ The language commonly spoken at home is: \_\_\_\_\_

### ABORIGINAL SELF-IDENTIFICATION

If you wish to declare the student is Aboriginal, please select one:

First Nation (status)  First Nation (non-status)  Métis  Inuit

For further information, please refer to: <https://education.alberta.ca/system-supports/results-reporting> or contact Alberta Education at 780.427.8501. If you have questions regarding the collection of student information by the school board, please contact the Office of the Superintendent at 403.945.4002.

### STUDENTS WHO DO NOT RESIDE IN THE SCHOOL ATTENDANCE AREA

Parents must register students living within the school's attendance area. Parents may request 'Out-of-Attendance Area' registration in another RVS school. This request is reviewed by the Principal of the requested school and may be approved if space and resources are available. Parents are responsible for transporting out-of-attendance area students to and from school. RVS form AF305A Out of Attendance Area application must be completed to begin the application process.

Is your residence located outside of the attendance area of this school? Yes  No

I understand I am responsible for transportation and may **not** be able to access RVS school bus service. Yes

### RVS SCHOOL BUS TRANSPORTATION

Rocky View Schools provides bus transportation services for students, between Grades 1-12, who live 2.4 km or greater from their designated school. Services also are provided for morning or afternoon kindergarten students who live outside the walk limit for their designated school. At a parent's cost, bus services may be available for students who reside less than 2.4 km from their designated school and for those who attend a school other than their designated school, including French Immersion students. All students new to Rocky View School who want to apply for bus services may do so in one of two ways:

1. Online registration via SchoolEngage at: <https://rockyview.schoolengage.ca/>
2. In person registration at RVS' Education Centre in Airdrie - you'll be encouraged to use a public computer to register via SchoolEngage, but we'll be there to help you!

For more information on transportation fees go to: <https://www.rockyview.ab.ca/registration/schoolfees>. Questions regarding services can be forwarded to: [transportation@rockyview.ab.ca](mailto:transportation@rockyview.ab.ca)

## CONSENT TO ELECTRONIC COMMUNICATIONS

Rocky View School Division No. 41 (RVS) would like to keep you informed about the latest school and school board information, events, announcements and opportunities for parents and students, through electronic communications such as e-mails and newsletters from your child's school and from RVS, school councils, and other school based or supported entities. Occasionally these communications may include information about offers, advertisements or promotions related to school activities or RVS activities such as but not limited to event tickets, school fees, yearbooks, field trip opportunities, student photos, and may fall into the definition of a "commercial electronic message" under the new Canadian Anti-Spam Law.

Due to the Canadian Anti-Spam Law, effective July 1, 2014, your child's school and RVS may not be able to send you these types of communications electronically without your permission.

To continue to receive such communications please sign below indicating your consent to receive such communications even if they are in whole or in part with the definition of a "commercial electronic message".

If you have any questions or wish to withdraw your consent at any time, contact your child's school principal either by e-mail or at the address of the school, both of which are on the school's website.

As defined by the Canada Anti-Spam Law, a "commercial electronic message" is:

(2) For the purposes of this Act, a commercial electronic message is an electronic message that, having regard to the content of the message, the hyperlinks in the message to content on a website or other database, or the contact information contained in the message, it would be reasonable to conclude has as its purpose, or one of its purposes, to encourage participation in a commercial activity, including an electronic message that:

- a) offers to purchase, sell, barter or lease a product, goods, a service, land or an interest or right in land;
- b) offers to provide a business, investment or gaming opportunity;
- c) advertises or promotes anything referred to in paragraph (a) or (b); or
- d) promotes a person, including the public image of a person, as being a person who does anything referred to in any of paragraphs (a) to (c), or who intends to do so.

**I wish to continue to receive electronic communication from RVS and my child's school:**

STUDENT LEGAL NAME: \_\_\_\_\_

DATE: \_\_\_\_\_ PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_ INDEPENDENT STUDENT SIGNATURE: \_\_\_\_\_

## SCHOOL DIVISION USE OF PERSONAL INFORMATION

Rocky View Schools (RVS) is authorized and required under the provisions of the School Act and its regulations, in accordance with the Freedom of Information and Protection of Privacy Act (FOIP), to collect, use and disclose the personal information necessary to provide an educational program and ensure a safe and secure school environment for students.

**Consent is not required for these purposes.**

Personal information means recorded information about an identifiable individual that may include but is not limited to: student name, age, grade, address, phone number, etc. The following are some examples of how personal information may be used by RVS. This list is not intended to be all-inclusive:

- Report cards, attendance
- Student records
- Student identification cards
- School library cards
- School yearbooks, memory books
- Photos including individual, class, team, club or videos for use within RVS
- School newsletters
- Field trips
- Secure RVS online environments
- Parent/guardian contact for absenteeism, emergencies, etc.
- Transportation services
- Classroom or program assignments and showcases
- Displays at schools or school jurisdiction office
- School sponsored activities such as fine arts productions, presentations, fairs, celebrations, clubs, sports activities
- Eligibility or suitability for an honour, award, scholarship, athletic program, etc.
- Law enforcement and/or first responders relating to safety, health, and security

Schools will contact parents /guardians when any additional consent is required in specific circumstances not covered explicitly or implicitly by this general consent.

*PLEASE NOTE: Photos, videos or images of students attending or participating in school activities (e.g., sporting events, concerts, cultural programs, clubs, field trips, graduation or other ceremonies), that are open to the general public, may be taken by RVS staff, the public-at-large, including journalists, reporters, videographers and other members of the media and used for purposes within and outside the school or school district. RVS cannot control or prevent the further distribution or use of these photos, videos, images or other personal information by those who access the information.*

### DECLARATION

**I hereby declare that I have read and understand the information contained on this Student Registration Form and in the "School Division Use of Personal Information" section and that the information I have provided is correct.**

STUDENT LEGAL NAME: \_\_\_\_\_

DATE: \_\_\_\_\_ PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_ INDEPENDENT STUDENT SIGNATURE\*: \_\_\_\_\_

\* As defined in the School Act "independent student" means a student who is

- (i) 18 years of age or older, or
- (ii) 16 years of age or older and (A) who is living independently, or (B) who is a party to an agreement under section 57.2 of the *Child, Youth and Family Enhancement Act*;

**IF INFORMATION PROVIDED ON THIS FORM CHANGES, PLEASE CONTACT THE SCHOOL IMMEDIATELY.**