# Northern Gateway Public Schools 2023-24 STUDENT REGISTRATION FORM

## **Registration Checklist:**

- Please download and complete the attached form. The form may be printed, completed and signed manually, or completed and signed digitally in Adobe Reader.
- □ Once the form has been completed, please sign and initial the form where indicated.
- Proof of residence is required to register for school. Parents will be required to provide a copy of their legal address to the school. Proof of residence can be verified with any bill or agreement that proves that this location is the student's legal home address (blue or green sign number) or street address. It can be in the form of a tax notice, lease agreement or a power or cable bill.
- □ Legal proof of a student's name and age is required to register for school. Proof of name and age can be provided via a copy of a birth certificate, permanent residency document, Canadian citizenship document or passport.
- □ If you require bus transportation please apply online at ngps.ca, **<u>Busing and Transportation</u>**.
- Submit your registration form including: completed, signed application, proof of residence, and proof of student's name and age to the school. Email, mail or fax your signed application and proof documents to the school, or contact the school to make arrangements to drop off your form in person.

Intake Appointments: Please be advised that an intake appointment may be required for new students.





### **STUDENT REGISTRATION 2023-24**

#### PLEASE READ THIS INFORMATION BEFORE COMPLETING THE REGISTRATION FORM

This registration form is a legal document. Before a student can be registered by a school, a student registration form must be completed in its entirety and signed by the parent/legal guardian or by the student (if living independently). The student registration form is used to enroll a student who is new to Northern Gateway Public Schools, who is returning to the division, or who is transferring to a school within the division. A student cannot be registered without a copy of a legal document (birth certificate, permanent residency document, Canadian citizenship document, or passport) that provides proof of legal name and age.

OFFICE USE ONLY Student ID #					ASN # (9 digits)					
		Create		Deem						
School     Grade     Room     Date of Registration (MM/DD/YYYY       A copy of the following is attached:     Birth Certificate     Residency Document     Canadian Citizenship Document     Passport										
If applicable, a copy of the leg								spore		
STUDENT INFORMATION	Print	the student's lega	surnam	e (last name) an	d given name(s) belov e, there is a space at t					adoption
INFORMATION         Date of Birth (MM/DD/YYYY)           Student's Legal Last Name         Date of Birth (MM/DD/YYYY)										
Student's Legal First Name							Grade Level			
Student's Legal Middle Name(s)							Language S	Language Spoken at Home (if other than English)		
Student's Preferred First Name Gender							e □ Fem	nale 🗆 Unspeci	fied	
Student Citizenship or Imm	igrant Sta	tus								
<ul> <li>Canadian Citizen</li> <li>Lawfully admitted to Car</li> </ul>		Child of Canad ermanent residence			Child of individual law International student	5 1				dence
Phone Numbers (with area		ermanentresident	e			(parent/gua			nd y)	
Home Phone					Cell Phone					
Siblings			Einst M				Calcard			A == =
Last Name			First N	ame			School			Age
Last Name			First Name			School Ag			Age	
Last Name			First N	First Name			School Age			Age
Town Residence Address (P	roof of Res	idence required)								
Unit Number House N		Street Name		Street Type	Town		Province		Postal Code	
Rural Legal Land Descriptio	n (Proof of Sectio			Township		Range			W5	
Subdivision				Lot		Block		Plan	Plan	
Rural Address Sign Number										
Mailing Address (if different t	nan student	's residence)								
Address or P.O. Box				Town		Province		Posta	Postal Code	
School History										
Has the student ever registe	red with I	NGPS? □ Yes	□ No	C	Previous NGPS	School				
Previous Non-NGPS Schoo	Attended	I Previous Sch	ool Phoi	ne Number	Previous Schoo	ol District	Pre	evious Scho	ool Province or Co	untry
Medical Information (This in	nformatio	n could be crucial	to the w	vell-being of the	student, although w	e understan	d this information			
Are there any serious medical conditions about which you wish the school to be aware? Please indicate below.  AHC Number  AHC Number  AHC Number										
Medical Notes (If more space is required, please attach additional notes)										

#### **Bus Transportation**

For i	the student require transpo nformation on student tra sportation@ngps.ca or 1-8	nsporta	ation and/or to ap	ply for busir	ng please visit <mark>ngps</mark>	.ca, Busing and Transpo	ortation or contact the Transp	ortation Department at			
	RENT/GUARDIAN	guarc		he <i>Family La</i>	w Act, Corrections		egal guardian is the parent or p conditional Release Act, Young				
	Relationship to Student										
	Last Name										
N	First Name					Mr., Mrs., Ms., Dr., etc.					
PARENT/GUARDIAN	Phone Numbers (with ar Home Phone	ea cod	e)			Dusiness Dhane					
						Business Phone					
	Cell Phone Email Address										
	Does the student reside with this individual?          Yes           No           If address is different than the student's, please complete the section below.          Town Residence Address          If address is different than the student's, please complete the section below.										
	Street Address				Town		Province	Postal Code			
FIRST LEGAL	Rural Legal Land Descrip			Section			Range	W5			
IRST	Subdivision				Lot		Block	Plan			
E	Rural Address Sign Numb	er			•		1				
	Mailing Address (if different than student's reside Address or P.O. Box			nce)	Town		Province	Postal Code			
		Relationship to Student									
z	Last Name						Ma Mar Ma Da ata				
DIA	First Name		- )				Mr., Mrs., Ms., Dr., etc.				
UAR	Phone Numbers (with area code)       Home Phone     Business Phone										
IT/G	Cell Phone					Email Address					
REN		Does the student reside with this individual? 🗆 Yes 🖆 No 🔰 If address is different than the student's, please complete the section below.									
LEGAL PARENT/GUARDIAN	Town Residence Address Street Address T				Town		Province	Postal Code			
	Rural Legal Land Descrip				Township		Range	W5			
ONC	□ SE □ SW Subdivision			Lot			Block	Plan			
SECOND	Rural Address Sign Numb	ber									
	Mailing Address (if differ	ent tha	n student's resider	nce)							
	Address or P.O. Box				Town		Province	Postal Code			
	EMERGENCY CONTACTS					es in the vicinity of the se tuation if the parent or c		s parent or guardian, who can			
Eme	rgency Contact #1					Relationship to Student					
Horr	ne Phone			Business P	hone		Cell Phone				
Eme	rgency Contact #2					Relationship to Student					
Home Phone Business F			hone		Cell Phone						
Gua	ardianship Rights and	l Stuc	ent Protectio	n							
Guai copy	rdians of the student must	be ider ed to b	ntified to ensure ea e placed in the stu	ich party's rig ident record	. The court seal mu	ust be evident on the or	ffecting guardianship rights or der. In rare instances, a child n or similar legislation.				
Does a legal document exist?   Yes  No Document Expiry Date (MM/DD/YYYY, if applicable)											
Туре	e of Legal Document 🛛 A	ccess a	nd/or Custody	🗆 Parenti	ng 🗆 Guardiai	nship 🗆 Protection					
proc		re that	the division has co	pies of all c			a parent or guardian, the onus Iardianship rights, responsibilit				

Are there family circumstances you wish to share with the school?  $\Box$  Yes  $\Box$  No

If yes, please make an appointment with the principal.

#### **Independent Student Status**

The *School Act* defines an independent student as someone 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 party to an agreement under Section 57.2 of the *Child, Youth, and Family Enhancement Act*.

Are you claiming status as an Independent Student under the definition of the *School Act*?  $\Box$  Yes  $\Box$  No

#### Francophone Rights

According to Section 10 of the *School Act* and Section 23 of the Canadian Charter of Rights and Freedoms, a parent or legal guardian who is a Canadian citizen has the right to have his/her children receive school instruction in French. This applies if the parent/guardian is a resident of Alberta **and** French was the first language learned, and is still understood, by at least one parent **or** one or more of the parents or one or more of their children have received/are receiving instruction in a French First Language Program or school in Canada (this does not include a French Immersion program).

If you have answered yes, the Student Record Regulation requires Northern Gateway Public Schools to release demographic information about the student and parent to the local Francophone Education Board upon written request from the school jurisdiction.

If yes, do you wish to exercise your right to have your child educated in French? 🗆 Yes 🗆 No

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.

□ Inuit

□ No

#### **Indigenous Self-Declaration**

If you wish to identify that your child has First Nations, Métis or Inuit ancestry, please specify:

□ Status/First Nations □ Non-Status/First Nations □ Métis

For further information, please refer to Alberta's First Nations, Métis or Inuit Student Self-Identification 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 Deputy Superintendent at 780-778-2800 or 1-800-262-8674.

#### **Student Treaty Status and Residency**

Does this student have treaty status? □ Yes □ No Does this student reside on reserve? □ Yes

Indian Registry Number (IRN – ten digit number)

Name of Reserve

Complete Address on Reserve

Digital Citizenship and Technology Use

As a condition of using Northern Gateway Public Schools network resources, I understand that access to division information resources, including access to internet and cloud-based resources, is a privilege and agree to abide by <u>Administrative Procedure 640 – Responsible Use of Technology</u> and the regulations identified in the <u>Technology Use Agreement</u>.

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#### Using and Disclosing Personal Information

Northern Gateway Public Schools recognizes that all procedures for the collection and storing of information by division staff in the course of affairs and procedures regulating the release of information to other parties must follow provisions of the *Freedom of Information and Protection of Privacy (FOIP) Act.* Access to information is guided by Administrative Procedure 564 - Freedom of Information and Protection of Privacy. Further details can be found in our FOIP and Media Consent document.

Please initial to indicate that you have read and understood the policies and regulations identified above.

Initials

#### Media Participation

While under the supervision of Northern Gateway Public Schools, I hereby give Northern Gateway Public Schools and outside organizations permission to photograph, video tape, audio tape, and/or interview my child. I understand that this means that a photograph(s), video(s), audio tape(s), interview(s), or likeness of my child may be collected, used, reproduced, and broadcast within NGPS and by the outside organization for displays, publications (including yearbooks), websites, social media, other electronic media, and advertising or promotional materials.

I hereby give Northern Gateway Public Schools permission to use, publish, display, and copyright any work, written material, or creative work created or authored by my child through school activities. I understand that artwork, written material, or creative work may be used by Northern Gateway Public Schools in division or school displays, publications (including yearbooks), websites, social media, other electronic media, and advertising or promotional materials. I understand that Northern Gateway Public Schools may make minor edits as deemed appropriate.

I understand that consent can be revoked at any time by written notification provided to my child's school. Further details can be found in our FOIP and Media Consent document.

Please initial to indicate that you have read and understood the guidelines explained above.

#### **Consent to Post Personal Information**

Northern Gateway Public Schools requests consent to post personal information (including but not limited to first name, last name, grade, photographs, video, audio, award recognition, and school related activities) to external websites, social media, media publications (including yearbooks), and promotional materials. I understand that my signature below indicates my consent.

I understand that once provided, consent, in whole or in part (e.g. last name or photo, etc.), can be revoked at any time by written notification provided to my child's school, acknowledging that although photos/videos will be removed from websites and social media accounts, it may not be possible to remove all traces of personal information from the Internet.

Signature

Further details can be found in our FOIP and Media Consent document.

#### Policies and Regulations

If the hyperlinked documents are unavailable for any reason, information related to the sections above is available at your school in paper format. Please ask your school secretary or principal.

#### Collection and Use of Personal Information Disclaimer

The information requested on this form is being collected pursuant to the *School Act*, Section 23, A.R. 71/99 and the *Freedom of Information and Protection of Privacy (FOIP) Act*, Sections 33(c), 39(1)(b), and 40(1)(c). Information acquired through this form is kept secure and access is restricted. In accordance with the Student Record Regulation, this form will be placed in the student's record file.

If you have any questions regarding this request for individual student information and about our use or disclosure of student information, please contact the school or Northern Gateway Public Schools' FOIP Coordinator at 1-800-262-8674.

DECLARATION	I am the legal guardian or the independent student referred to in this registration form. I have read and understand the information regarding guardianship and I have identified all guardians for this student. I hereby certify the foregoing information to be true, corre and complete.						
First Parent/Guardian Print Name		Signature	Date				
Second Parent/Guardian Print Name		Signature	Date				

# Pat Hardy Primary School 2023 - 2024 Registration Kindergarten Preference

Please number your choices in order of preference:

- □ Morning Class (Monday to Friday)
- □ Monday / Wednesday / Scheduled Fridays
- Tuesday / Thursday / Scheduled Fridays
- □ All Day Everyday (Mon-Fri) \$325 per month

OFFICE USE ONLY	
Date Returned:	
ADED Payment Received (School Cash / Cheque / Cash)	