

STUDENT REGISTRATION FORM



INTRODUCTION: To be officially registered as a student in Livingstone Range School Division No. 68, this student registration form must be completed and signed either by the legal guardian or by the independent student. This registration form is a legal document and therefore the information requested must be accurate and complete. **Schools must be notified immediately of any changes to the information.** The information requested on this form is being collected pursuant to the *School Act, Sections 10, 18, and 27, and Student Records Regulation A.R. 213/89; and the FOIPP Act, Sections 32, 33, 37 & 38; and the Canadian Charter of Rights and Freedoms, Section 23.* Information acquired through this form is kept secure and access is restricted. **All items in the shaded areas are to be completed in cooperation with school administration staff.**

School: _____	Enrollment Date: _____
AB Ed. Student ID #: _____	Homeroom: _____
Grade: _____	School ID #: _____

1. STUDENT INFORMATION

NOTE: A Vital Statistics document must be presented to the school upon registration to verify the student's legal name, citizenship and birth date. Acceptable vital statistics documents are: birth certificate, Canadian citizenship papers, adoption certificate, passport, visa, or a permanent landed immigration/residence document, a copy of which will be retained on file.

Student's Legal Last Name: _____

Student's Legal Given Name(s): _____

Birth Date (M/D/Y): _____ / _____ / _____ Gender: Female: Male:

<p>Citizenship (Check One)</p> <p><input type="checkbox"/> Canadian Citizen</p> <p><input type="checkbox"/> Child of Canadian Citizen (child not a Canadian Citizen)</p> <p><input type="checkbox"/> Stepchild of Canadian Citizen</p> <p><input type="checkbox"/> Step-child of Temporary Foreign Worker</p> <p><input type="checkbox"/> Permanent Landed Immigrant/Resident</p> <p><input type="checkbox"/> Student Authorization Visa No.: _____</p> <p><input type="checkbox"/> Child of Individually Lawfully Admitted to Canada for permanent or temporary residence</p>	<p>Birth Date/Legal Name Verification – (Document Copy on File)</p> <p><input type="checkbox"/> Birth Certificate</p> <p><input type="checkbox"/> Passport</p> <p><input type="checkbox"/> Adoption Certificate</p> <p><input type="checkbox"/> Canadian Citizenship papers</p>
	<p>Visa Expiry Date: _____</p> <p>Temp. Permit Expiry Date: _____</p>

Student's Preferred Names: (if different than legal names)

Student's Preferred Last Name: _____

Student's Preferred Given Name(s): _____

Student's Current Mailing Address:

Apartment #: _____ Street Address: _____

P.O. Box No.: _____ Town: _____ Postal Code: _____

Legal Land Description: _____
1/4 Sec. Twp. Rge. W of Block Lot

Transportation:

Does the student plan on riding a Livingstone Range School Division school bus? Yes: No:

If yes, list driver: _____ Stop: _____

Emergency In-town Billet: _____ Phone: _____

2. SIBLINGS

Name: _____ Birth Date (M/D/Y): _____ / _____ / _____ Age: _____ School: _____

Name: _____ Birth Date (M/D/Y): _____ / _____ / _____ Age: _____ School: _____

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3. LEGAL GUARDIAN(S) INFORMATION:

For the purpose of the *School Act*, a parent is a legal guardian for the child. Please identify the legal guardian(s) for the child being enrolled. Legal guardianship in Alberta is defined in the *School Act* and the *Family Law Act, Section 20*.

Legal Guardian 1: Male: Female: (Please check the one that applies to you.)

Last Name: _____ Dr. Mr. Mrs. Ms. Miss

Given Name(s): _____

Relationship to Student: _____ Does the student reside with this legal guardian? Yes: No:

If "No", please identify the individual with whom the student lives: _____

Relationship to the Student: _____

Legal Guardian 1's Current Mailing Address: (if different from the student's)

Apt. # or Suite #: _____ P. O. Box #: _____

Street or Rural Address: _____

Town/City: _____ Province: _____ Postal Code: _____

Home Telephone: _____ Business Telephone: _____

Email Address: _____ Cell Phone: _____

Place of Employment: _____

Legal Guardian 2: Male: Female: (Please check the one that applies to you.)

Last Name: _____ Dr. Mr. Mrs. Ms. Miss

Given Name(s): _____

Relationship to Student: _____ Does the student reside with this legal guardian? Yes: No:

If "No", please identify the individual with whom the student lives: _____

Relationship to the Student: _____

Legal Guardian 2's Current Mailing Address: (if different from the student's)

Apt. # or Suite #: _____ P. O. Box #: _____

Street or Rural Address: _____

Town/City: _____ Province: _____ Postal Code: _____

Home Telephone: _____ Business Telephone: _____

Email Address: _____ Cell Phone: _____

Place of Employment: _____

4. CUSTODY INFORMATION:

A) In some instances, a child may be the subject of a protective court order (i.e. a restraining order). In other instances, an order or agreement made pursuant to legislation affecting guardianship rights, custody or access rights to the student may be issued. If any such orders or agreements exist, a copy is required to be placed in the student's record to ensure that each party's rights can be properly respected.

Please indicate if any such orders or agreements exist: Yes: No:

If "Yes", legal documentation has been provided to the school: Yes: No:

B) Where a person claims to be the parent or guardian, or claims the existence of any limitation on the authority of a parent or guardian, the onus is on the person to provide proof of the claim. Please ensure that the Division has copies of all current orders or agreements addressing guardianship rights, responsibilities, entitlements, or otherwise affecting the custody of or access to your child.

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5. STUDENT'S EMERGENCY INFORMATION

(An emergency contact person is someone to be contacted if the parent or guardian cannot be contacted.)

1.	Emergency Contact Name: _____	Telephone No.: _____
	Relationship: _____	Cell Phone No.: _____
2.	Emergency Contact Name: _____	Telephone No.: _____
	Relationship: _____	Cell Phone No.: _____
	Student's Doctor's Name: _____	Student's Health Care No.: _____

6. STUDENT'S MEDICAL AND FAMILY INFORMATION

Does your child have any serious medical conditions about which you wish the school to be aware of? Yes: No:

Please specify: _____

Emergency action required for the above (may require written directions from a family physician): _____

Please note any family circumstance about which you wish the school to be aware of: _____

Name of babysitter/daycare (if applicable): _____ Telephone No. _____

7. SECTION 23 ELIGIBILITY (FRANCOPHONE EDUCATION)

According to *Section 10* of the *School Act* and *Section 23* of the *Canadian Charter of Rights and Freedoms (CCRF)*, a parent or legal guardian who is a Canadian citizen, has the right to have his/her children receive school instruction in French. If any one of the following conditions exists, the student is eligible for French instruction:

- Either parent's mother tongue is French (French was the first language learned and understood by one of the parents).
- Either parent received primary school instruction in French in Canada.
- One or more children in the family have received/are receiving primary or secondary school instruction in French in Canada.
- This does not include French Immersion.

Do you claim entitlement to a Francophone education under the terms of the CCRF? Yes: No:

If "Yes", do you wish to exercise these rights? Yes: No:

8. FIRST NATIONS, MÉTIS, INUIT

If you wish to declare that your child is an Aboriginal person, please specify:

Status Indian/First Nations Non-Status Indian/First Nations Métis Inuit

Alberta Education is collecting this personal information pursuant to *Section 33* of the *FOIPP Act* as the information relates directly to and is necessary to meet its mandate and responsibilities to measure system effectiveness over time and develop policies, programs and services to improve Aboriginal learner success.

For further information, or if you have questions regarding the collection activity, please contact the office of the Director, Aboriginal Policy, Policy Sector, Information and Strategic Services Division, Alberta Education, 10155 – 102 Street, Edmonton, AB, T5J 4L5, (780)427-8501.

Does the student have treaty status?	Yes: <input type="checkbox"/>	No: <input type="checkbox"/>
Does the student reside on reserve?	Yes: <input type="checkbox"/>	No: <input type="checkbox"/>
On which reserve does he/she reside?	_____	
Band of Membership:	_____	
Ban No.:	_____	
Family No.:	_____	
Child Position No.:	_____	

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9. SCHOOL HISTORY

Name of school previously attended: _____ Telephone No.: _____

Name of previous school district: _____

Previous province/country \if not Alberta/Canada: _____

Has this student ever attended school in Livingstone Range School Division? Yes: No:

If "Yes", please name which school: _____

If returning to school following an extended absence, please indicate reason for interruption: _____

10. 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 or older, and who is living independently or who is a 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*? Yes: No:

11. DECLARATION BY PARENT/LEGAL GUARDIAN, OR INDEPENDENT STUDENT

I hereby declare that I am/we are the legal guardian(s) or the independent student referred to in this registration form, and that I/we hereby certify the foregoing information to be true, correct and complete.
I also declare that I have read and understand the information regarding legal guardianship and have identified all legal guardians for the above-named child.

Signature of Parent/Legal Guardian/Independent Student

Date

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT (Please read the attached FOIPP information)

- I certify that I have received and read the attached brochure explaining the implications of the *Freedom of Information and Protection of Privacy ACT (FOIPP)*, and give permission for the uses that will be made of personal information collected herein.
- I wish to object to the use of information about, or photographs of my child under the following circumstances: _____

Signature of Parent/Legal Guardian/Independent Student

Date

*This FOIPP acknowledgement will be in effect for as long as the student is in Livingstone Range School Division, or until the Division is notified of any changes. If you have any questions related to the information being requested on this form, please call the school office for assistance.

THIS SECTION TO BE COMPLETED BY SCHOOL PERSONNEL

REGISTRATION/ENROLLMENT STATUS VERIFICATION:

Registration for current year: Pre-registration for next year: Date CUM File Requested: _____

Exit Description: _____ Exit Date: _____

NOTES:

Principal's Approval: _____ Date: _____

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Please read the following information explaining the implications of the *Freedom of Information and Protection of Privacy Act (FOIPP)* and sign the Student Information Form giving permission for the uses outlined in this brochure.

The *Freedom of Information and Protection of Privacy Act (FOIPP)*, which came into effect for school boards on September 1, 1998, sets controls and standards on how public bodies such as school boards collect, use and disclose personal information that is in their custody or under their control.

The *FOIPP Act* requires that school boards:

- Collect personal information directly from the individuals the information is about, unless another method of collection is authorized under *Section 33(1)(a)* of the Act
- Provide the individual with the legal authority for the collection (e.g. *School Act*)
- Explain the purpose of the collection and how the information will be used
- Provide a contact person should an individual have questions relating to this activity

The information collected on this form as part of the student registration process is personal information as referred to in the *FOIPP Act*. This personal information is collected pursuant to the provisions of the *School Act* and its regulations (e.g. for the establishment of a student record, determination of residency), and pursuant to *Section 32(c)* of the *FOIPP Act* as the collection is related directly to and is necessary to a school board's obligation to provide students with an education program that meets their needs and to provide a safe and secure school environment (e.g. program placement, determination of eligibility and/or suitability for provincial or federal funding, contact and health-related information in the event of problems or emergencies). Personal information may also be provided to the Minister of Learning for the purpose of carrying out programs, activities or policies under his administration (e.g. research statistical analysis).

USES OF INFORMATION

The *Freedom of Information and Protection of Privacy Act* requires that consent be obtained for the collection and use of personal information that is not authorized under the *School Act*. Livingstone Range School Division #68 believes the uses listed below are part of a vital, healthy and functioning school, and participation of all students is important and encouraged. The following are examples of how personal information is used:

- Use of a student's name, photo, and/or comments in the school calendar, newsletter, yearbook, graduation book or other school or divisional publications.
- Taking of individual, class, team or club photos for school purposes, and the use of student photos for the purposes of identification
- Use of student names/class assignments on artwork or other creative works of students displayed within the school or School Board sites, or at school-sponsored displays in the community.
- Display of student pictures, along with the student's name and class assignment/event, within the school or School Board sites.
- Use of student names in honor rolls, birthday recognition and other similar acknowledgements within the school or School Board sites.
- Use and publication of student names as part of graduation, scholarship or other award recognition and ceremonies.
- Use of student names and academic information necessary for determining eligibility or suitability for provincial, federal or other types of awards or scholarships in the event the Board applies on a student's behalf.
- Use of student names, related contact information, and telephone numbers for absenteeism verification.
- Taking of photos and/or videos of students and interviews with individual students by local media, where they may or may not be identified by name or face, in various school settings (see "Media" section under Information Disclosure on next page).
- Taking of photos and/or videos of classroom or other school activities not open to the public by School Board personnel where the material will be used within the school or School Board sites. (*Where individual students are identified or interviewed and the material will be used outside the school or School Board sites, a separate and specific consent will be required. You will be contacted prior to this event taking place.*)
- Release of names of parents/guardians, addresses and phone numbers, as well as class lists of students, to the School Council and other parent groups charged with organizing activities for the school (e.g. band parents, hot lunch program committee) for the following purposes: fund-raising, volunteer programs, program organization, meeting notification, and contact during times of emergency. (*The School Council and parent groups will only have access to personal information necessary for performing their function, and they will be advised that this is personal information to be used only for the authorized purpose(s). These groups will be directed to appropriately destroy the information at the end of the current school year.*)

If you have any concerns with these uses of information or other possible uses, please notify the school principal, in writing, and we will accommodate your concerns.

If you have any questions about the collection, use or disclosure of information collected in this registration process or on any matters of access or privacy, please contact the School Principals, or:

Superintendent of Schools

Livingstone Range School Division No. 68
5202 – 5 Street East
PO Box 69
Claresholm, AB TOL OTO

Phone: 403-625 3356
Toll Free: 1-800-310-6579
Fax: 403-625-2424
Email: centraloffice@lrsd.ab.ca

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FOIPP INFORMATION DISCLOSURE

STUDENT PRODUCTION(S)/ WORK(S)

As part of the students' educational program, they may be recorded or taped, their work will be displayed, and they may have their work reproduced for nonprofit, educational purposes. The student's production(s)/work(s) may be shown at educational displays during open house, inservice sessions and other school-related activities at school or School Board sites, or at school or School Board sponsored displays in the community, or used in a school publication (e.g. newsletters) during the current school year. If student work is to be used for purposes other than those noted above, a separate Copyright Release Form will be required to be signed by the parent/legal guardian/independent student prior to the use being permitted.

If you have any concerns with the use of student work as noted above, please identify your concern, in writing, to the school principal, and your request will be accommodated.

MEDIA

Livingstone Range School Division #68 enjoys and encourages an open and beneficial relationship with the local print (i.e. newspapers) and broadcast media (i.e. television, radio) as a means of promoting and reporting on school activities. Typically, these activities would include:

- Photographs or videos of students, where they may or may not be identified by name or face;
- Working in a classroom or other educational setting (possibly off-campus)
- Participating in extra- and co-curricular activities
- Playing or socializing during recess or noon hour
- Interviews with individual students when students may or may not be identified by name or face.

If an outside organization other than the local media (print or broadcast media who normally cover school events) requests photographs or videos of students or interviews with students at a non-public event, a separate Consent to Release Students' Personal Information form will be required to be signed by the parent/legal guardian/independent student prior to access being granted. Photographs or video taken by the media or any individual at a school function where the public is welcome to attend are not within the control of the school or the School Board. Also, from time to time, the school division itself will be taking photos in schools for its own promotional uses. Video or photos may be used in printed items for the school division, on the divisional website, or in presentations made by division personnel.

If you have any concerns over the involvement of media in school activities, or in the school division using images for promotional reasons as noted above, please identify your concern, in writing, to the school principal, and your request will be accommodated.

STUDENT PARTICIPATION IN SCHOOL ATHLETICS/PERFORMING ARTS

ATHLETICS

As part of the normal operation of school athletics, player rosters are compiled, consisting of players' names, position played, grade level, height and sometimes weight. Typically, this information is distributed to schools within the competing conference, schools hosting tournaments, various print and broadcast media, and the governing bodies of the respective athletic association. In addition, we enjoy and encourage an open relationship with the print and broadcast media in their endeavors to promote and report on school athletics and to help us celebrate student success.

PERFORMING ARTS

Similarly, as part of the normal operation of a school's performing arts programs (e.g. band, drama), student information is compiled, consisting of student name, grade level, and sometimes the area of specialty within the arts program. This information is typically distributed to schools hosting competitions, various print and broadcast media, and the governing bodies of the respective performing arts association, if applicable. In addition, we encourage and enjoy an open relationship with the print and broadcast media in their endeavors to promote and report on school performing arts programs, and to help us celebrate student success.

It is considered important that the information listed below continue to be disclosed for those students participating in school athletics and performing arts programs. Students participating in these programs:

- May have their photograph displayed within the school or School Board sites
- May have their name, along with other relevant personal information, included in school publications and programs to be distributed at performances/competitions
- Will have personal information, including name, grade, parent name(s) and contact information, along with other personal information relevant to the program/sport, released to the teacher/individual/coach in charge of the program or any formal parent group charged with organizing activities for the program/team
- May be interviewed by print/broadcast media in situations other than events open to the public
- May be photographed/videotaped by the print/broadcast media at times other than public performances or competitions
- May have their program/roster information disclosed to the print/broadcast media, and
- Will have their program information distributed to schools and/or agencies hosting competitions

Information disclosed will be limited to that which is directly related to the students' involvement in their particular activity/sport. Photographs or videos taken by the media or any individual at a school function where the public is welcome to attend are not within the control of the school or the School Board.

If you have any concerns over the release of the personal information as indicated above, please identify your concern, in writing, to the school principal, and your request will be accommodated.