

[NEW STUDENTS] STUDENT REGISTRATION FORM

DATE OF REGISTRATION:		/		
	MONTH	DAV	VEAD	

Name of School W	here Student						
is Registering:							
Student Information	on						
Student's Legal Surname	e:						
Student's Legal First Na	me:						
Student's Legal Middle	Name:						
Any other name by which	ch the student is						Gender:
commonly known in the	family and						
community:					ı		☐ Male ☐ Female
Student's Date of Birth:			MONTH		D	AY	YEAR
Citizenship							
Canadian Citizen:	YES □ NO	List B Canad	irth Country da:	y, IF	NOT		
If English is not the stud	ent's first					Does the fan	nily need assistance
language, please indicat						with interpre	etation?
mainly spoken at home	:					☐ YES	□ NO
Arrival Date in Canada:		Citizenship, IF NOT Canadian:					
			Child of a	Cana	adian Citizen		
MONTH DAY	_/	Permanent Resident/Landed Immigrant					
MONTH DAY	YEAR				•	•	r temporary resident
			Student A	utho	rization – stu	ıdy permit	
Medical Information	on						
MCP Number:						ergies requirin	g epi-pen
(Student identification purposes)				aar	ninistration:		
pu. p 0000)					YES	NO	
Are there any medical conditions about which you wish to make the school aware?* *If a student has a medical condition or disability which can affect student attendance and participation in learning activities, it is the parent/guardian's responsibility to make the school aware of the condition.							

Parent/Guardian Information					
1. □ Mother	☐ Father ☐ Legal Guardian		2. □ Mothe	r □ Father	☐ Legal Guardian
Other (e			□ Other in	(:£.)	-
☐ Mr □	☐ Ms ☐ Miss	☐ Mrs ☐ Dr	☐ Mr I	□ Ms □	Miss
Last Name:			Last Name:		
First Name:			First Name:		
Student Lives with: ☐ Both parents ☐ Mother ☐ Father ☐ Legal Guardian ☐ Other (Specify)					
Primary contac		Both parents		-	
		Other (Specify)			
•	cess agreement	☐ YES ☐ NO	□ NOT APP	LICADI E	
or court order o					ordian #2 /if annlicable
Mailing Addres	act Information	Parent/Gua	rdian #1	Parent/Gt	uardian #2 <i>(if applicable)</i>
(including postal					
Street Address:					
(if different from	above):				
Phone Number	(Home):				
Phone Number	(Work):				
Phone Number					
(Cell) OPTIONA					
Email Address (OPTIONAL:				
Automated Message Contact Information: (Schools regularly send automated messages regarding school					
closures, meetings, homework assignments, etc.) How do you want to have automated messages sent?					
☐ Home phone number ☐ Work phone number ☐ Email address ☐ All					
EMERGENCY CONTACT: (Parent/guardian must provide name and contact information for at least one individual					
the school may contact in the case of an emergency, if the school cannot reach a parent/guardian.)					
Name:			Name:		
Relationship			Relationship		
to Student:			to Student:		
HOME #:			Home #:		
WORK #:			Work #:		
Cell #:			Cell #:		
Address:			Address:		

School Information					
Student Number:(If applicable)					
Registering for Program Placement:	☐ Englis	sh	☐ Fre	nch Imme	ersion
Has Student Previously Attended School Central School District?	ol in Nova	If yes	, what scho	ool did s/he	e attend?
☐ YES ☐ NO	T				
Name of Last School Attended, if not the same as above:					
School Address:					
School Phone Number:		Last Gr	ade Attend	ed:	
Reason for Leaving Last School:					
School Withdrawal Date:	MONTH	1		DAY	YEAR
Has student been enrolled in a special p	orogram?] YES	□ NO	
If yes, was individual plan developed?] YES	□ NO	
(e.g. Individual Education Plan: IEP/ISSP) Siblings attending same school:					
Name:			(Grade:	
Name:					
Name:					
Transportation type:					
(NLESD will provide transportation in accord	ance with provincial	and dist	rict student	transportati	ion policies.)
☐ Walker ☐ Parent/other drop-off ☐ School bus ☐ Special transportation					
Bus Route (if applicable):] 2	7 4	□ 5		
	12 L 3 L	<u> </u>	<u></u>	□ 6	<u> </u>
Declaration	ad an Abia famus is a				if the selection.
I declare the information that I have provided on this form is complete and accurate. I will notify the school of any changes to the information on this form.					
Signature of Parent/Guardian/Independent	t Student		i	Date	_
The personal information requested on this form is collected under the authority of the Schools Act, 1997. This information will be used to establish a student record; administer and evaluate educational programming and support services; allocate staff and other resources appropriately; and, to determine eligibility for funding. It may be used for contact purposes in the event of problems or emergencies, for statistical purposes and for other purposes that relate directly to, and are necessary for, operating a program or activity. This information will be treated in accordance with the privacy protection provisions of the Access to Information and Protection of Privacy Act and school district staff members are required by law to protect the personal information provided on this form. If you require further information on the collection and use of this information, contact Newfoundland and Labrador English School District, Central Region Office, (709) 256-2547					
FOR OFFICE USE ONLY: □ Bus Route:			Bus #:		
☐ Date of Birth Verified (e.g. birth certificate, passport)		☐ Immigration Status Verified			Status Verified
☐ Report card from previous school available ☐ File requested from previous sc			from previous school		
☐ Custody and access arrangements confirmed (e.g. copy of excerpt from agreement/court order).					

Consent				
I, being the parent/guardian of the student named: voluntarily give the Newfoundland and Labrador English School District consent for the following:				
□ YES □ NO	 My child's work (e.g. artwork/creative media, project) to be displayed within the school, at community and public events and in competitions. The following are examples of how student work may be shown: Displays at school district sites or school district-sponsored events Displays at school-sponsored open houses Professional development sessions and conferences School or community publications (eg. local papers, school newsletter, reports) Posting or publishing on school or Newfoundland and Labrador English School District websites. 			
☐ YES ☐ NO	My child's name to be released with respect to scholarships, honor rolls, achievements and other special recognition to the school district, government or media officials.			
☐ YES ☐ NO	My child's name to be included in the list of names, phone numbers, class lists for distribution to coaches, supervisors, parent association, volunteers, school council and school newsletters.			
☐ YES ☐ NO	My child's photographs, name, grade, school and references to his/her work in various public forums as described and to use or reproduce likenesses of my child in any legal manner for the internal and external promotional and informational activities of the school and Newfoundland and Labrador English School District. This information is to be used for general educational, non-profit purposes.*			
☐ YES ☐ NO	My child to be recorded by the media while he/she is participating in school-sponsored events.*			
Please be advised that you may withdraw your consent for any of the above at any time by writing to the school principal.				
*From time to time	the school district receives requests from media representatives to come on to school property and			

*From time to time the school district receives requests from media representatives to come on to school property and report on, photograph and/or record an aspect of the school or its programs. Occasionally, we also invite media representatives to cover school events and activities. We also promote school activities and events by posting photographs and information in school and district newsletters, brochures, reports, advertisements, yearbooks and on our website(s). Schools in our district cooperate with the media and other organizations, within reason, to share information about schools and student achievements. Publicity is carefully considered before being permitted. However, we recognize that there are instances where parents may not wish their child to be recorded during educational activities. Once photographs, student name, other identifying information or student work are released in any public forum, Newfoundland and Labrador English School District cannot control or prevent the further distribution or use of the material by those who access the information. Newfoundland and Labrador English School District cannot prevent media outlets from photographing students or trying to interview them from points beyond our control, such as across the street from the school. If this is a concern, you may wish to discuss the matter with your child.

Please note that when public events such as Christmas concerts and sports tournaments are held [where spectators including parents, members of the media and other members of the general public may attend] anyone in attendance may take photographs or videotape the event without consent. Other than at events considered public, media representatives must obtain permission from the principal/vice-principal to interview or photograph students on school property.