Northern Gateway Public Schools 2024-25 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 submit your signed application and proof documents in person, to the school.

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





STUDENT REGISTRATION 2024-25

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 #						A	SN # (9 digits)						
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	y of the lega	ıl guardia	anship/custody or	der is atta	ached: 🛛 Yes		No						
STUDE INFORMA			the student's legal rs. If the student u									th certificate or	adoption
Student's Legal Last Name Date of Birth (MM/DD/YYYY)													
Student's Legal First Name Grade Level													
Student's Legal Middle Name(s)							Langua	Language Spoken at Home (if other than English)					
Student's Preferre	Student's Preferred First Name							Gender Male Demale Durspecified					
Student Citizensh	nip or Immig	grant Sta	tus										
🗆 Canadian Citiz			Child of Canad				d of individual law	5 1		'		1 5	dence
Lawfully admit Phone Numbers			ermanent residenc	e		Inter	national student ((parent/guar	dian residing	in anothe	r countr	ry)	
Home Phone							Cell Phone						
Siblings													
Last Name					Name				School				Age
Last Name	Last Name First				st Name				School /			Age	
Last Name First				First N	t Name				School Age			Age	
Town Residence Unit Number	Address – P House Nu		Residence require Street Name	d	Street Type	To	own		Province			Postal Code	
onicitatioer	nouse ne		Street Hume		Succertype				TTOVINCE			i ostat code	
<u> </u>		– Proof Sectio	of Residence requ	uired	Township			Range				W5	
□ NE □ NV □ SE □ SW		Jectio			rownsnip			Nange					
Subdivision					Lot			Block			Plan		
Rural Address Sig	n Number				•								
Mailing Address (if different than student's residence) – Proof of Residence				-					Postal Code				
Address of F.O. B	Address or P.O. Box				Town Provinc			FIOVINCE	POSIAL CO			Coue	
School History Has the student e	ver register	ed with N	NGPS? □ Yes	□ No	0		Previous NGPS	School					
Previous Non-NG	PS School /	Attended	Previous Sch	ool Phor	ne Number		Previous Schoo	ol District		Previou	s Schoo	l Province or Co	ountry
Medical Informat	ion (T <u>his i</u> nf	ormatio	n could be crucial	to the w	vell-being of the	e stu	dent, although w	e understan	d this inform	ation is op	otional)		
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 information on student tra il at <u>transportation@ngps</u>	insportation and/or to ap	ply for busing ple	ase visit ngps.	ca, <u>Busing and Transpo</u>	ortation, or contact the Trans ill.	portation Department via			
	RENT/GUARDIAN		he <i>Family Law Ac</i>			gal guardian is the parent or pe onditional Release Act, Young (
	Relationship to Student									
	Last Name									
Z	First Name				Mr., Mrs., Ms., Dr., etc.					
DIA	Phone Numbers (with an	rea code)								
NL PARENT/GUARDIAN	Home Phone				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									
	Street Address		Τον	wn		Province	Postal Code			
FIRST LEGAL	Rural Legal Land Descrip In NE In NW In SE In SW	То	wnship		Range	W5				
IRST	Subdivision					Block	Plan			
Ξ	Rural Address Sign Number									
	Mailing Address (if differ Address or P.O. Box	ent than student's reside				Province	Postal Code			
	Address of P.O. Box		10	Town		Province	Postal Code			
	Relationship to Student									
	Last Name									
IAN	First Name					Mr., Mrs., Ms., Dr., etc.				
LEGAL PARENT/GUARDIAN		Phone Numbers (with area code)								
GU	Home Phone				Business Phone					
NT,	Cell Phone Email Address									
ARE		Does the student reside with this individual? Pes No If address is different than the student's, please complete the section below. Town Residence Address Town Residence Address								
ALF	Street Address		To	wn		Province	Postal Code			
LEG	Rural Legal Land Descrip	otion Section	To	wnship		Range	W5			
OND	□ SE □ SW Subdivision		Lot	•		Block	Plan			
SECO	Rural Address Sign Numl	201			Block					
SI										
	Address or P.O. Box	ent than student's reside		wn		Province	Postal Code			
	EMERGENCY				s in the vicinity of the sc uation if the parent or gu	hool, other than the student's	parent or guardian, who can			
Eme	CONTACTS ergency Contact #1				Relationship to Student	מה מומדדה מרומעמונמטוכ.				
Home Phone Business Phone					Cell Phone					
Emergency Contact #2				Relationship to Stude						
	ne Phone		Business Phone			Cell Phone				
поп	le Priorie		business Priorie			Cell Phone				
Gua	ardianship Rights an	d Student Protectio	n							
copy		red to be placed in the stu	udent record. The	court seal mu	st be evident on the ord	ecting guardianship rights or o er. In rare instances, a child m r similar legislation.				
Does a legal document exist? 🗆 Yes 🗆 No Document Expiry Date (MM/DD/YYYY, if applicable)										
Type of Legal Document □ Access and/or Custody □ Parenting □ Guardianship □ Protection										
						parent or guardian, the onus i ardianship rights, responsibilitie				

otherwise affecting the custody of or access to your child.

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? □ Yes □ 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).

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

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.

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 □ No

□ Inuit

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 <u>Administrative Procedure 640 – Form 640-1 Technology Use Agreement.</u>

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

Initials

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, correct, and complete.							
First Parent/Guardian Print Nam	ne	Signature	Date					
Second Parent/Guardian Print N	Name	Signature	Date					