

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, this form must be completed in its entirety and signed by the parent or legal guardian, or by the student (if living independently). This form is used to enrol a student who is new to Edmonton Public Schools, or who is returning to the District. Use this form to record important changes, such as the student identification (legal name, date of birth, gender, identification document type and document number), legal relationship of student and parent/guardian, francophone rights or Aboriginal self-identification.

Office Use Only

EPS #	<input type="text"/>	ASN #	<input type="text"/>	Program	<input type="text"/>
School	<input type="text"/>	Grade	<input type="text"/>	Room	<input type="text"/>
First Day of School			Month	Day	Year

STUDENT INFORMATION

Print the student's legal surname (last name) and given names below. These are the names on the student's birth certificate or adoption papers. If the student uses a different first or last name, there is a space at the end of this section for *preferred name*.

Student's Legal Last Name			
Student's Legal First Name			
Student's Legal Middle Name		Date of Birth	
		Month	Day
		Year	<input type="checkbox"/> Male
			<input type="checkbox"/> Female
Student's Residence			
Address	City	Province	Postal Code
Mailing Address (if different than Student's Residence – mail-outs from school will be sent to this address)			
Address	City	Province	Postal Code
Home Phone (with area code)		Other Phone (with area code)	
()		()	
Preferred First Name		Preferred Last Name	

SCHOOL HISTORY

Has the student ever registered at an Edmonton Public School? Yes No

Previous Non-EPS School Attended	City	Province/Country
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CITIZENSHIP STATUS

What is the citizenship or immigrant status of the student?

*Supporting documentation required; see page 4 for Citizenship Information.

- Canadian citizen
- Lawfully admitted to Canada for permanent residence (student)
- Temporary Resident: Expiry Date Required (International Students only): /Month /Day /Year
- Child of a Canadian citizen
- *Child of an individual lawfully admitted to Canada for permanent or temporary residence
- *Step-child of a Canadian or Temporary Foreign Worker

SECTION 23 – FRANCOPHONE RIGHTS (Optional)

According to 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/legal 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, or 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*? Eligible Ineligible

If eligible, provincial Student Record Regulation requires Edmonton Public Schools to release demographic information about the student and parent to the local Francophone Education Board upon written request from that school jurisdiction.

DISCLOSURE RESTRICTIONS

A parent or legal guardian may have their right to access information about a student removed by a legal process.

Please indicate if a legal document exists which restricts access to information about this student: Yes No

If you have answered yes, the school will collect the required documentation which will be retained on the student's record.

PARENT/LEGAL GUARDIAN INFORMATION

If there are two parents or guardians, it is important to fill in both sections below, whether or not the parents or guardians are living together. A guardian is defined in section 20 of the Family Law Act, or a guardian appointed under Part 5 of the Child Welfare Act, Part 1, Division 5 of the Child, Youth and Family Enhancement Act or section 23 of the Family Law Act.

***NOTE:** It is very important that you indicate whether or not **each** parent/guardian or independent student is Roman Catholic or not Roman Catholic. Under the terms of the *School Act*, the residency status of a student is based on religion and where the parent(s) or legal guardian(s) live. A student is a **resident** of Edmonton Public Schools if at least one of the parents or guardians live in Edmonton and is not Roman Catholic.

First Parent/Legal Guardian	Relationship to Student <i>(select one)</i> <input type="checkbox"/> biological or adoptive mother <input type="checkbox"/> legal guardian		
	Last Name		
	First Name		Mr., Mrs., Ms., Dr., etc.
	Address <i>(if different from student's)</i>		Does the student reside with this individual? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Address	City	Province Postal Code
	Home Phone <i>(with area code)</i> ()		Business Phone <i>(with area code)</i> ()
	Other Phone <i>(with area code)</i> ()		Email
	Religious Declaration <i>(check one)</i> *See note above <input type="checkbox"/> Not Roman Catholic <input type="checkbox"/> Roman Catholic		

Second Parent/Legal Guardian	Relationship to Student <i>(select one)</i> <input type="checkbox"/> biological or adoptive father <input type="checkbox"/> legal guardian		
	Last Name		
	First Name		Mr., Mrs., Ms., Dr., etc.
	Address <i>(if different from student's)</i>		Does the student reside with this individual? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Address	City	Province Postal Code
	Home Phone <i>(with area code)</i> ()		Business Phone <i>(with area code)</i> ()
	Other Phone <i>(with area code)</i> ()		Email
	Religious Declaration <i>(check one)</i> *See note above <input type="checkbox"/> Not Roman Catholic <input type="checkbox"/> Roman Catholic		

OPTIONAL - Other Relevant Adult	Relationship to Student <i>(select one)</i> <input type="checkbox"/> step-father <input type="checkbox"/> step-mother <input type="checkbox"/> other: _____		
	Last Name		
	First Name		Mr., Mrs., Ms., Dr., etc.
	Address <i>(if different from student's)</i>		Does the student reside with this individual? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Address	City	Province Postal Code
	Home Phone <i>(with area code)</i> ()		Business Phone <i>(with area code)</i> ()
	Other Phone <i>(with area code)</i> ()		Email

OPTIONAL - Other Relevant Adult	Relationship to Student (<i>select one</i>) <input type="checkbox"/> step-father <input type="checkbox"/> step-mother <input type="checkbox"/> other: _____			
	Last Name			
	First Name	Mr., Mrs., Ms., Dr., etc.		
	Address (<i>if different from student's</i>)		Does the student reside with this individual? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Address	City	Province	Postal Code
	Home Phone (<i>with area code</i>) ()	Business Phone (<i>with area code</i>) ()		
Other Phone (<i>with area code</i>) ()	Email			

FAMILY CIRCUMSTANCES Are there any family circumstances about which you wish the school to be aware?

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 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

Religious Declaration (*check one*) *See note on page 2 Not Roman Catholic Roman Catholic

EMERGENCY/MEDICAL INFORMATION	An emergency contact is someone who may be contacted if the student's parent/legal guardian is unavailable.
EMERGENCY CONTACTS (<u>NOT</u> STUDENT'S PARENT/LEGAL GUARDIAN)	
Emergency Contact #1	
Home Phone of Emergency Contact #1 (<i>with area code</i>) ()	Other Phone (<i>with area code</i>) ()
Emergency Contact #2	
Home Phone of Emergency Contact #2 (<i>with area code</i>) ()	Other Phone (<i>with area code</i>) ()

MEDICAL INFORMATION (*Optional*)

You do not have to provide information on medical concerns, but the information could be crucial to the well-being of the student.

Are there any serious medical conditions about which you wish the school to be aware? Please indicate below:

Diabetes Epilepsy Allergies (*please specify*) Haemophilia Heart Condition Asthma Other (*please specify*)

Medical Notes: _____

Student's Alberta Health Care Number: _____

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT (FOIP)

The personal information collected on this form is part of the District registration process and is authorized under the provisions of the *School Act* and its regulations and also under Section 33(c) of the FOIP Act. All personal information collected during the registration process and during the course of the school year will be used to provide an educational program and ensure a safe and secure school environment. If you have any questions or concerns regarding the collection or intended use of this information please contact the school principal.

ADDITIONAL ENROLMENT INFORMATION

CITIZENSHIP DOCUMENTATION

Citizenship Documentation:

Expiry Date (if applicable):

Parent Work Visa/Permit	Month	Day	Year
Parent Study Visa/Permit	Month	Day	Year
Permanent Residency			
Temporary Residency			
Citizenship Card			

Birth Country, if NOT Canada

The following questions are asked to assist in program placement and to assist in communication in an emergency.

Is English the student's first language? Yes No

What language is mainly spoken at home?

STUDENT PROTECTION

An individual may be forbidden contact with the student by way of a legal process.

Please indicate if a legal document exists which forbids an individual from having contact with this student: Yes No

If you have answered yes, the school will collect the required documentation which will be retained on the student's record.

ABORIGINAL SELF-IDENTIFICATION (Optional)

If you wish to identify yourself as 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(c) of the Freedom of Information and Protection of Privacy (FOIP) Act as the information relates directly to and is necessary to meet Ministry mandates and responsibilities to measure system effectiveness over time and develop policies, programs and services to improve Aboriginal learner success. Alberta school boards are also collecting this information pursuant to the same section in conjunction with section 2(1)(t) of the Student Record Regulation and for the same purposes. This information will also be used to determine the provincial First Nations, Métis and Inuit Funding Allocation provided to school authorities.

For further information or if you have questions regarding the collection activity, please contact the Office of the Director, Aboriginal Policy, Strategic Services Division, Alberta Education, 10155-102 Street, Edmonton AB, T5J 4L5, 780-427-8501. If you have questions regarding the collection activity by Edmonton Public Schools, please contact First Nations, Métis, and Inuit Education, Edmonton Public Schools, 780-429-8580.

DECLARATION BY PARENT, LEGAL GUARDIAN, OR INDEPENDENT STUDENT

The information provided in this document is true, correct and complete. I have identified all parents and legal guardians for this student. The individuals identified in the "parent/legal guardian" section have the right to view student information and make educational decisions for this child, unless otherwise indicated here and supported with legal documentation.

Further, I recognize that it is my responsibility to notify my child's school should the above information change.

Date: _____ Signature: _____

Office Use Only

A copy of any student identification documentation should be placed in the Student Record. **Bolded documents** will be accepted in the event of an enrolment audit. More than one document may be required to verify student identification and residency or to prove right to education in Alberta.

LEGAL STUDENT IDENTIFICATION VERIFICATION DOCUMENT

Select applicable documentation(s):

Alberta Adoption Order	Canadian Passport
Alberta Birth Certificate	Canadian Permanent Resident Visa
Alberta Health Care Card	Canadian Study Permit
Alberta Identification Card	Canadian Temporary Resident Visa
Alberta Change of Name Certificate	Canadian Work Visa
Alberta Operator's License (Independent Student only)	Foreign Birth Certificate
Canadian Birth Certificate outside Alberta	Foreign Marriage Certificate
Canadian Certificate of Indian Status	International Student Visa
Canadian Citizenship Certificate	Passport issued outside Canada
Canadian Marriage Certificate	Registration Form (temporary declaration)

ADDRESS VERIFICATION

More than one document may be required. Select applicable documentation(s):

Operator's License
Utility Bill
Lease Agreement
Property Tax Bill
Other:

Address verification documents are NOT part of the student record. **Do not retain at the school.**