

STUDENT REGISTRATION FORM

The personal information requested on this form is being collected under the authority of Alberta's Freedom of Information and Protection of Privacy Act (FOIP), the Education Act and its regulations, and the Canadian Charter of Rights and Freedoms, Section 23.

Parents/guardians are responsible to ensure the accuracy of this information and to report changes.

| OOL DIALS | Nan | ne of Scho | ool: | | | School Year: | | | | | |
|---|---------|--------------------|--------------------|------------------|---|-------------------------------|------------------------------|-------------------------------|---------------------|--|--|
| STUDENT INFORMATION: Alberta Student Nu | | | | | mber: | | | | | | |
| Legal Surname: | | | | | iven Name(s): | | | Legal Middle Name: | | | |
| Preferred Surname: | | | | | Preferred Given Name: | | | | | | |
| Birth Date: Gender: Grade: | | | | Student's Ph | Physical Address: | | | | | | |
| Year / Month / Day | | | | | | | | | | | |
| Student Email Address: | | | | | City: Postal Code: | | | | | | |
| Primary Phone Number: | | | | | | Student Cell (if applicable): | | | | | |
| Does this student ha | ave any | life-threat | ening me | dical con | ditions (please | list): | | | | | |
| Has this student rec | eived o | or required | additiona | l support | s for learning? | □Yes □I | No If Yes | , please cl | heck all that apply | | |
| ☐Speech Language | | | | ing Supp | _ | □Social/Emo | | | | | |
| ☐ Individual Progra | | | ividual Su | pport Pla | ın □Oth | er: | | | | | |
| Language | | | | Temporary or | Permanent R | esident: | ndependent Studen | t: | | | |
| Primary Spoken: | | Canadia | Canadian \square | | | | Immigration Document Yes No | | | | |
| | | Permanent Resident | | | | Expiry Date: | , | | | | |
| | | Tempora | ry Reside | nt 🗆 | | / | / | | | | |
| Other (please specify) | | | | | | Year / Month / Day | | | | | |
| Has your student previously attended a Golden Hills School? | | | | | Last School Attended (name of school and city): | | | | | | |
| □Yes □No | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| PARENT/GUAR | | | MATIO | I: Inform | nation for <u>ALI</u> | _parents/leg | gal guardia | ns must l | pe provided | | |
| Parent/Guardian #1 Name: | | | | | Relationship to Student: ☐ Has Custody ☐ Lives With | | | | | | |
| Mailing Address: | | | | | City: Postal Code | | | | | | |
| Rual Students – Leg | al Land | Descriptio | n: ¼ Sec | Sec | Twnshp | Range | 911 | . Adress (b | lue sign) | | |
| Phone (home): | | Phone (d | cell): | | Phone (work): | | Email Addı | ress: | | | |
| Parent/Guardian #2 Name: | | | | | | | | ☐ Has Custody ☐ Lives With | | | |
| Mailing Address: | | | | | | City: | | | Postal Code | | |
| Rual Students – Leg | al Land | Descriptio | n: ¼ Sec | Sec | Twnshp | Range | 911 | . Adress (b | lue sign) | | |
| Phone (home): Phone (cell): | | Phone (work): | | Email Address: | | | | | | | |
| EMERGENCY CO | NTAC | T INFORI | MATION | l: (Conta | ct other than | parents - us | sed in eme | rgencies | only) | | |
| Contact #1: | | | | | Relationship to Student: | | | | | | |
| Phone (home): | | | Phone (cell): | | | Email Address: | | | | | |
| Contact #2: | | | | | | Relationship to Student: | | | | | |
| Phone (home): | | | Phone (cell): | | | Email Address: | | | | | |

REVISED: October 30, 2024 Page 1 of 2

| STUDENT LIVES WITH: | | | | | | | |
|---|--|--|--|--|--|--|--|
| ☐ Parent/Guardian #1 ☐ Parent/Guardian #2 ☐ Both ☐ Other - please specify: (Please check all that apply) | | | | | | | |
| | | | | | | | |
| Custody: In rare instances, a child may be designated as "Protected" if a court has issued an order under the Child Youth and Family Enhancement Act, the Divorce Act or the Youth Criminal Justice Act or is the subject of a parenting time restriction. As per the Education Act, where a person claims to be a parent or guardian or claims the existence of any limitation on the authority of a parent or guardian, the onus is on that person to provide proof of the claim. | | | | | | | |
| Does such an order exist? \square Yes \square No If "yes", please discuss this situation with the school administration. Legal documentation will be required. | | | | | | | |
| If other family circumstances are important for the school to know, please advise the principal. Questions in this part of the registration form are designed to assist in our effort to maintain good school-home communications. If you have difficulty responding to any of these; please speak to your school principal. | | | | | | | |
| Pursuant to Section 23 of the Canadian Charter of Rights and Freedoms, citizens of Canada, | | | | | | | |
| whose first language learned and still understood is French; or who have received their primary school instruction in Canada in French have the right to have their children receive primary and secondary instruction in French; or | | | | | | | |
| of whom any child has received or is receiving primary or secondary school instruction in French in Canada, have the right to have all their children receive primary and secondary school instruction in the same language. | | | | | | | |
| 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. | | | | | | | |
| A. According to the criteria above are you eligible to have your child receive a Francophone education? \Box Yes \Box No | | | | | | | |
| B. If yes, do you wish to exercise your right to have your child receive a Francophone education? ☐ Yes ☐ No | | | | | | | |
| | | | | | | | |
| If you wish to declare the student is First Nations, Métis or Inuit please select one: ☐ First Nations (status) ☐ First Nations (non-status) ☐ Métis ☐ Inuit | | | | | | | |
| For further information, please refer to: https://education.alberta.ca/system-supports/results-reporting/ or contact Alberta Education at 780-427-8501. | | | | | | | |
| If you have questions regarding the collection of student information by the school board, please contact your school. | | | | | | | |
| If student resides on a reserve, please provide the following: | | | | | | | |
| Band Number: Treaty Number: | | | | | | | |
| Legal Document used to verify registration: (select one) PLEASE PROVIDE A COPY with registration: | | | | | | | |
| ☐ Birth Certificate ☐ Permanent/Temporary Resident Documents ☐ Passport ☐ Official Stats Canada Documents | | | | | | | |
| ☐ Work or Study Permit ☐ Canadian Citizenship Document ☐ Adoption Papers | | | | | | | |
| I hereby certify the foregoing information is correct, and complete, to the best of my knowledge and belief. This is confirmation that I have provided information for <u>ALL</u> parents/legal guardians of the student. | | | | | | | |
| Parent/Guardian Signature: Date: | | | | | | | |

REVISED: October 30, 2024

Page 2 of 2