



EVERGREEN CATHOLIC SEPARATE REGIONAL DIVISION NO. 2

Suite 110, 381 Grove Drive, SPRUCE GROVE, ALBERTA T7X 2Y9 TELEPHONE: 780-962-5627 FAX: 780-962-4664

STUDENT REGISTRATION for the 20____/20____ school year

For Office Use Only:

Student ID# _____

Alberta Education Student I.D. # _____

School Assigned to: _____

This information is collected and distributed in accordance with the Freedom of Information and Protection of Privacy (FOIP) Act, Sections 33(1) and 37. Your personal information will be protected as per Part 2 of the Act. For further information concerning the completion of the form, please contact your FOIP Coordinator at Evergreen CSRD No. 2, Suite 110, 381 Grove Drive, Spruce Grove, AB T7X 2Y9. Telephone: (780)962-5627

STUDENT INFORMATION:

Legal Surname _____ First _____ Middle _____ Called first name _____ Grade _____
Sex M _____ F _____

Preferred Surname (would be different from Legal Surname) _____ Home Phone Number _____ Birthdate _____/_____/_____
Month / Day / Year

Disclaimer: Student computer log in credentials will be created using: First Name, Middle Initial and Legal Surname

Mailing Address _____ Birth Certificate _____
Religion: Catholic _____
Other _____

City _____ Province _____ Postal Code _____
Rural Municipal Address: (example: 5 25162 Twp.Rd. 510) _____
Any of the following:
Baptismal Certificate of parent/guardian _____
Baptismal Certificate of child _____
Confirmation Certificate of child _____
Letter from a priest testifying to the faith life of the parent and/or child _____

Legal Land Description: (example: Cherlyn Heights SE32-53-1-5)

Subdivision Name _____ Section _____ TWP _____ Range _____ Meridian _____

Student Alberta Health Care Number _____ Name of Doctor _____ Phone Number _____

Emergency Contact Person _____ Phone Number _____ Babysitter/Daycare _____ Phone Number _____
(if parent/guardian unavailable)

Parent/Guardian/Emergency Contact

Student lives with (please check one):

Both _____ Father only _____ Mother only _____ Guardian _____ Living _____
Independently _____ Other* _____

*if Other, explain: _____

PARENT/GUARDIAN INFORMATION:

Father/Guardian:

Surname _____ First _____ Work: Phone Number Ext. # _____ Cell phone(s): _____ Religion: Catholic _____
Other _____
E-mail address: _____

Address (if different from student above) _____

Mother/Guardian:

Surname _____ First _____ Work: Phone Number Ext. # _____ Cell phone(s): _____ Religion: Catholic _____
Other _____
E-mail address: _____

Address (if different from student above) _____

SCHOOL HISTORY:

Previous School Name _____ Phone Number _____

Address _____ City _____ Prov. _____ Postal Code _____

SACRAMENTAL PREPARATION

In partial fulfillment of the right, responsibility and duty of Catholic separate schools to fully permeate Catholic theology, philosophy, practices and beliefs, the principles of the Gospel and teachings of the Catholic Church in all aspects of school life, this school is actively involved in sacramental preparation of students. To assist in sacramental preparation, please advise whether your child has received any of the following sacraments:

Baptism _____ (please provide copy of Baptismal Certificate)

First Reconciliation _____ First Eucharist _____ Confirmation _____

HEALTH OF STUDENT:

List Allergies:

Please comment on any health problems or any other matters that will assist the school:

CITIZENSHIP OF STUDENT:

Check one: _____ Canadian Citizen
_____ Permanent Resident/Landed Immigrant
_____ Foreign Student (complete Entry/Visa Info.)
_____ Other

Student Visa Expiry Date _____ / _____ / _____
Month / Day / Year Verified
Entry into Canada _____ / _____ / _____
Month / Day / Year

Are the student's parents/guardians _____ Home Owner
_____ Renter
_____ Other

School Support _____ 100% Public
_____ 100% Separate
_____ Other

TRANSPORTATION INFORMATION:

Do you require bus service: _____ Yes _____ No

If Yes, from _____ Home _____ Daycare _____ Babysitter

Transportation Address: _____

SECTION 23 FRANCOPHONE EDUCATION ELIGIBILITY DECLARATION

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 Canadian 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 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 as set out in the *Canadian Charter of Rights and Freedoms*, are you eligible to have your child receive a French first language (Francophone) education?

☐

B. If yes, do you wish to exercise your right to have your child receive a French first language (Francophone) education?

☐

CUSTODY:

In rare instances a child may be designated as "Protected" if a court has issued a restraining order under the Child Welfare Act, The Domestic Relations Act, The Divorce Act, or the Young Offenders Act.

Please indicate if the school administration should be aware of any such Court Order, for the protection of your child.

___ YES ___ NO

If YES, make arrangements to discuss this situation with the School Administration. You will be expected to provide legal documentation to support your request.

ABORIGINAL LEARNER DATA COLLECTION INITIATIVE:

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

☐ Status Indian/First Nations ☐ Non-Status Indian/First Nations ☐ Metis ☐ Inuit

Alberta Learning is collecting this personal information pursuant to section 33(c) of the FOIP 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 in addition to other legislation applicable to the educational institution.

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 Learning, 10155 – 102 Street, Edmonton AB, T5J 4L5 (780) 427-8501.

Does the student have treaty status? ___ Yes ___ No

Does the student reside on a reserve? ___ Yes ___ No If yes, On which reserve does he/she reside? _____

Band of Membership: _____ Band No. _____ Family No. _____

Child Position No. _____

NOTICE TO PARENT OR GUARDIAN OF RELIGIOUS PERMEATION

The *Alberta Human Rights Act* requires a school board to give notice to a parent or guardian when courses of study, educational programs, institutional materials, instruction or exercises include subject matter that deals primarily and explicitly with religion. All of the schools in this district are Catholic Separate Schools, the essential purpose of which is to fully permeate Catholic theology, philosophy, practices and beliefs, the principles of the Gospel and teachings of the Catholic Church, in all aspects of school life, including in the Curriculum of every subject taught, both in and outside of formal religion classes, celebrations and exercises. Every course of study and educational program, institutional materials instruction and exercises will at all times, include subject matter that deals primarily and explicitly with religion.

DECLARATION BY PARENT, LEGAL GUARDIAN, OR STUDENT (ONLY IF STUDENT IS LIVING INDEPENDENTLY) :

I HEREBY CERTIFY THE INFORMATION PROVIDED ON THIS FORM AND ALL ADDENDUMS TO BE TRUE, CORRECT, AND COMPLETE.

SIGNATURE: _____

DATE: _____



EVERGREEN CATHOLIC SEPARATE REGIONAL DIVISION NO.2

ADDENDUM TO STUDENT REGISTRATION FORM

PARENTS - PLEASE READ CAREFULLY

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT

Student Name _____

Birth date _____

School _____

Grade _____

On September 1, 1998 the Freedom of Information and Protection of Privacy Act [FOIPP] came into effect for all Alberta Schools. Under this legislation schools will continue to gather student information [allowed under the School Act] but schools will begin to indicate to parents how the information will be used. The purpose of this notice is to inform you of the uses of student information collected by Evergreen CSRD No. 2 Schools.

There is virtually no change in the use of the information collected from our previous practice, and the uses listed below are considered to be a vital part of a healthy, functioning school.

The following items describe activities where student information may be used and such uses [as legislated by the FOIPP Act] now require your consent.

NOTICE OF ACTIVITIES

- A. students' names, photos and comments may be included in the school calendar, yearbook, newsletter, annual report, website, Division website, or other school publications
- B. individual, class or team photos may be taken and used for the purpose of identification
- C. students' names may be included on artwork or other materials displayed at school or Division sites or at school sponsored displays in the community
- D. students' names and parents'/guardians' telephone numbers may be used for the purpose of taking attendance at school, field trips and transportation services
- E. students' names, telephone numbers and addresses may be included in school directories
- F. students' names may be included in listings of honour rolls, graduations, scholarships, awards or for special recognition (e.g. birthday) purposes
- G. students' names may be included on class lists posted for the purpose of class placement
- H. students' names and telephone numbers may be provided to classroom parent representatives [e.g. hot lunch programs] or for fan-out purposes [e.g. notification of emergency school closures]
- I. family information for the purpose of disseminating School/Division satisfaction surveys
- J. students' names and grade level may be provided to the Public Health Nurse for the purposes of health and immunization programs

Please note: Where individual students are identified or interviewed and the material will be used outside the school, a separate and specific consent will be requested of parents. Parents will be contacted prior to such events taking place.

Photos and videos of school activities however, that are open to the general public may be taken and used for purposes outside the school, and are beyond the School Division FOIPP mandate.

*****All information placed in a student's record will continue to be protected and used in compliance with the FOIPP Act*****

If there are uses in the foregoing list (A through J) with which you are not in agreement, please indicate by identifying the applicable letter(s) in the space provided below.

I do **not** consent to items:

Please sign this notice and return it to your child's school.

Signature of Parent/Guardian _____

Date _____

If you have questions concerning the Freedom of Information and Protection of Privacy Act, please contact your school principal, or the Evergreen Division Office at 780-962-5627.



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ADDENDUM TO STUDENT REGISTRATION FORM

PARENTS – PLEASE READ CAREFULLY

Student Name Birth date School Grade

All schools in Evergreen CSRD function in accordance with our ***Division Mission Statement***:

In response to an expressed need for Christ-centered schools, our Evergreen Catholic Separate Regional Division # 2 was initiated by the parents of the Catholic community. We openly celebrate our common bond of faith in God.

Following in the footsteps of Jesus Christ and in partnership with the Home and Parish, we are committed to serve each individual student in an atmosphere of Faith, Hope and Love. We strive to educate the whole student spiritually, Intellectually, esthetically, emotionally, socially and physically.

Through this mission we promote the highest quality of Catholic education in order to prepare all students to live as compassionate, competent and contributing citizens in a changing society.

In congruence with the Mission Statement, all parents and students registering in Evergreen CSRD schools agree to the following:

All students are expected to take Religious Education and to participate in various religious celebrations that occur from time to time. Non-Catholic students, however, are not expected to participate in the Sacrament of Holy Communion.

Traditional Catholic religious symbolism and art are prominently displayed throughout our buildings. The Cross and Crucifix are especially important symbols of our faith as well as portraits of Jesus, Mary, and various saints.

We view each person as created in the image of God. Consequently we emphasize the need for each person in our schools to respect the rights of others. We hope, as a result of attending our Catholic schools, students of other denominations will grow stronger in their own traditions and Faith.

I hereby acknowledge the foregoing conditions and circumstances and agree to adhere to these conditions.

Signature of Parent/Guardian Date Signature of Student (junior high or older)