

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:					

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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:							

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