

École Lacombe Junior High School

Student Registration Form

English French Immersion

Creating Success I	For All Learners
--------------------	------------------

se	Alberta Student Number (ASN)					Date	
Office Use Only	Grade	Homeroom		PowerSchool ID			
0							
Stu	dent Information						
Stude	nt's Preferred Name						
	Last Name			First Name			Middle Name
Stude	ent's Legal Name			TUSTICATIO			
	Last Name			F : (N			M. 111 M
Home	Phone Number		Student's Cell Pho	First Name one Number	Date	of Birth	Middle Name
							□ Male □ Female
Mailir	g Address		Ci	ity	Moni	· · · · · · · · · · · · · · · · · · ·	
	0						
Has s	tudent attended a Wolf Creek Pu	ublic School before	e? 🗆 Yes 🗆	□ No			
Previ	ous Wolf Creek School		School last atten	ded (if different) includ	le City, Province and P	hone Number	
Citi	zenship						
	e indicate the citizenship or immi	igrant status of the	e student?				
	Canadian Citizen	0			Child of an individual	,	
	(Birth Certificate or Citizenship	• • •			permanent or tempora (supporting documentation	•	ork visa.
	Permanent Resident/Lar (Landed Immigrant Papers reg				(supporting documentation	lequileu)	
Temporary Resident - Student (Student Visa required) Other:							
Sec	tion 23 Francopho	ne Educati	on Eligibilit	y Declaration	ו		
Pursu	ant to Section 23 of the Canadia	•		itizens of Canada			
	 whose first language learn who have received their p 			French have the righ	t to have their children	receive primary and	secondary
	instruction in French; or			in renormate the right		receive primary and	scoolidary
	• 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 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? (Please place an X in the appropriate box.)							
□ Yes □ No □ Do not know B. If yes, do you wish to exercise your right to have your child receive a French first language (Francophone) education?							
		, 0	ave your child recei	ive a French first lang	uage (Francophone) ec	lucation?	
		□ No					
Cur	stody						
		arted by a court or	der under the Child	Welfare Act or the D	omestic Relations Act	or The Divorce Act	r the Young
In some instances a child may be imparted by a court order under the Child Welfare Act, or the Domestic Relations Act, or The Divorce Act, or the Young Offenders Act.							
Pleas	e indicate if the school administra	ation should be av	vare of any such co	urt order that pertains	to your child. 🛛 Ye	s 🗆 No	
If the	e is a court order regarding custo	ody and access to	your child, please p	provide a copy of the c	order so the school can	comply.	
Ind	ependent Student S	Statue					
				opre of ago or older o	r (ii) 16 years of age at	older and (a) whe is	living independently
	School Act defines an independer who is party to an agreement un				i (ii) to years of age of	oluer, and (a) who is	inving independently,

Are you claiming status as an "Independent Student" under the definition in the School Act?

Aboriginal Declaration

If you wish to declare the student is Aboriginal, please select one:

□ First Nation (status) □ First Nation (non-status)

Métis

🗆 Inuit

For further information, please refer to: www.education.alberta.ca/system-supports/resultsreporting 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 School Board Superintendent at Wolf Creek Public Schools 6000 Highway 2A, Ponoka, Alberta, T4J 1P6, 403-783-3473.

	Father Social Worker	Mother Contact Information	□ Other (please specify)	
Father's Name		Father's Email		
Address (if different from student)		City	Postal Code	
Residence Phone Number	Day F	Phone Number	Cell Phone Number	
Mother's Name		Mother's Emai		
Address (if different from student)		City	Postal Code	
Residence Phone Number	Day F	hone Number	Cell Phone Number	
Guardian's Last Name	·	Guardian's Firs	st Name	
Address (if different from student)		City	Postal Code	
Residence Phone Number	Day F	Phone Number	Cell Phone Number	
Additional email address #1	I	Additional email ad	dress #2	

Student Physical Address Information					
Apt. Number	House Number		Street or Leg	al Land Description	(example: 55 St or Legal Land Description as in SW-25-41-24-W4)
Town/City		Province		Rural Address spec	ifically the Blue 911 Sign (Rural Residences Only)
-			AB		

Emergency & Medical Information						
In case of emergency, school closure, or if no one answers the home telephone number, please provide us with names and phone numbers of emergency contacts other than parents.						
Emergency Contact # 1 Name	Day Phone	Phone Type	Relationship			
Emergency Contact # 2 Name	Day Phone	Phone Type	Relationship			
Are there any medical problems your child may be experiencir (physical conditions, illness, allergies, etc.) Please specify	g which his/her teachers should be made aware?	□ Yes □ No				
Emergency action required for the above						

CPS – Freedom of Information & Protection of Privacy

Schools play an important role in the education and socialization of our children. In this process, personal information is often collected and used for authorized programs and activities that are a normal part of school life. Further information regarding the collection and use of personal information not specifically itemized under the School Act is available at your school main office.

It is important to understand that school events which are open to the public are not subject to the conditions of the FOIP Act. These events may include general assemblies, concerts, school plays, special activities, academic-focused activities and athletics. The general public, parents and media may be in attendance and are allowed to take photographs, create video and audio recordings, and conduct interviews, without first obtaining consent. (It is not expected that the general public or parents will conduct interviews.) The media are expected to work cooperatively with schools within the realm of mutually agreed upon guidelines and protocol.

Throughout the school year, there will be opportunities for television, radio, newspaper, community organizations, and School Division Representatives to be invited into the school to provide outside coverage of events and programs not included in the general public category described above. Also, throughout the year, there may be opportunities to display your son/daughter's work or other forms of school work at locations outside of the school. There may also be educational activities where your son/daughter's school work may be hosted or displayed online via a website or social media tool. All of the activities described in this paragraph are not considered to be in the public domain category described in bold print above. Your signature (parent/guardian) will authorize your selected option with respect to your son/daughter (as named on this form) being involved with the following activities:

- 1. interviewed by the media; approved community organizations; School Division.
- 2. photographed by the media; approved community organizations; School Division.
- 3. video or audio recorded by the media; approved community organizations; School Division.
- 4. having student work and/or accomplishments displayed, recognized, or reproduced outside of school (i.e. signed art work, creative writing, Student of the Day, or academic presentations such as Science Fair projects).
- 5. having student work posted in various social media tools for educational purposes
- 6. having your son's/daughter's name, photograph and/or school work posted on Wolf Creek Public Schools website.

Note: Information relating to these student work/recognition activities noted in points 4, 5 and 6 are often communicated to the home in advance.

Please select either Option 1 or Option 2 below

Option 1: Permission Granted

I have read the information above and understand and accept that there are a variety of uses that may be made of personal information in the context of a school setting, including the items listed under points 1 through 6 above.

I give my consent to having my son/daughter involved with all of the activities listed under points 1 through 6 above.

Option 2: Permission Not Granted

Specifically I do not consent to the following activities (<i>Please circle the applicable activities objected to</i>): 1 2 3 4 5 6 All 1-6	I have read the information above and understand and accept that there are a variety of uses that may be made of personal information in the context of a school setting. However, I will NOT provide my general consent to allowing my son/daughter to participate in the activities described in points 1 through 6 above.					□ No			
1 2 3 4 5 6 All 1-6	Specifically I do not consent to the following activities (Please circle the applicable activities objected to):								
		1	2	3	4	5	6	All 1-6	

Unless the school is notified of a change, the signed document will be in effect for the entire time that your son/daughter is registered in this school. If you have any questions or concerns regarding the collection or use of information, please contact the FOIP Coordinator at the Wolf Creek Public Schools

office — 403-783-3473.

First Nations Band and Treaty Information				
Does the student reside on an Indian Reserve and qualify for Federal Government funding?				
If Yes, Reserve	House Number	Band	Status	
Treaty Number:				
Special Education Needs				

WCPS offers individual program planning for students identified with special education needs. Has your child been identified as having a special need and/or received specialized programming services?

□ Yes □ No

□ Yes

Information regarding special education programming is available through the school administration, the special education facilitator or the student services department.

No

English as a Second Language

Is English the student's first language spoken at home?	Yes	
If No, what is the first language spoken at home?		

Wolf Creek Public Schools Registration Form, updated December 2016

School Council/School Fund Raising Society

Schools have a School Council which represents the parents and engages in activities in the school. The School will normally make the	Parent/Guard	dian name,
phone number and mailing address as well as the student's name and grade level available to the School Council for contact purposes.		
Do you as a Parent /Guardian consent to the school providing your contact information to the School Council and/or the School Fund Raising Society (if applicable)?	□ Yes	🗆 No

Other Information

Is there any other information or particular problems your child may be experiencing about which his/her teachers should be aware? (family circumstances, siblings, etc.) Please specify:

Consent for Contact by Wolf Creek Public Schools

I agree to receive contact from Wolf Creek Public Schools, which primarily includes my child's school, to send me important information such as school emergency, closure, attendance and other valuable reminders. This contact can include phone, email and/or text messaging and can be unsubscribed at any time.

Wolf Creek Schools work hard to ensure that no unnecessary messages are sent or that messages are not sent too frequently to parents via digital or electronic methods thereby ensuring that parents are not receiving too many notifications.

This contact may be provided through various digital or electronic methods:

- 1) Primarily through email for school newsletters and reminders
- 2) Primarily through phone for attendance and emergency information
- 3) Through text message, if I opt in using Parent Portal

I understand that I can unsubscribe for these features at any time should I find that I no longer require this contact. The contact information that I provided through my registration process will be used and can be updated by me when contacting the school.

I understand that I may need to subscribe for some of these services myself through the school website or Parent Portal. Assistance with subscribing or unsubscribing to phone, email or text messages can be provided from the school office.

Your signature (parent/guardian) on this registration form will authorize your selected option with respect to your consent for contact.

□ Yes, I provide consent for contact by Wolf Creek Public Schools. I understand that my email address and home/mobile phone numbers will be used and that if I would like text messaging, I will need to subscribe to this text messaging service on the Parent Portal.

□ No, I do not provide consent. I recognize this means I will not have access to the information described above as readily via digital means as those who do provide consent.

Computer and Network Access

Wolf Creek Public Schools provides wireless access to student devices and encourages students to bring their own device for use in classroom learning activities. Wolf Creek also provides access to a parent purchase program for student owned devices. If you are interested, please contact your school office for more information.

Declaration

I hereby certify that the information provided on this form is true, correct and complete to the best of my knowledge and belief.			
Date	Parent/Guardian Signature		

For Office Use Only		
Notes:	Principal's Acceptance Signature	
Indicate the legal student identification verification document	Last four Digits	Expiry Date
	3	
□ Birth Certificate □ Citizenship Certificate □ Canadian Passport	Other (specify)	