

STUDENT INFORMATION										SCHOOL USE ONLY					
Name of School										Enrollment Date					
										M	D	Y			
Student's <u>Legal Surname</u> (as stated on Birth Certificate)				First Name			Middle Name			Student I.D. Number					
Also Known As Surname				Also Known As First Name			Student Cell No.			Alberta Education I.D. Number					
Mailing Address				Town			Postal Code			Citizenship					
Residence / Street Address				Town			Home Phone No. <input type="checkbox"/> Unlisted			Custody					
Rural Legal Land Description <input type="checkbox"/> NE <input type="checkbox"/> NW <input type="checkbox"/> SE <input type="checkbox"/> SW		Section	TWP	Range	W th Meridian		Gender <input type="checkbox"/> M <input type="checkbox"/> F		Date of Birth M   D   Y			<input type="checkbox"/> Vital Stats Verification (per Alberta Education documentation requirements) <input type="checkbox"/> ILP <input type="checkbox"/> Fees Paid <input type="checkbox"/> Requested Student Record DATE: <input type="checkbox"/> Received Student Record DATE:			
Citizenship: <input type="checkbox"/> Canadian <input type="checkbox"/> Other		Registering for Grade _____			Has the student previously attended school in Foothills School Division? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, where/when _____										
Entry Date to Canada: _____		First Language Spoken _____													
Visa Expiry Date: _____		French Immersion <input type="checkbox"/> Yes													
Note: School verification of documents required															
<b>High School Students Only</b> Student registering for <input type="checkbox"/> 1st <input type="checkbox"/> 2nd Semester Registered by (employee name): _____										If student is entering Foothills School Division from another school division, provide name of school _____ and city/town and province _____					
If you wish to declare that you are an Aboriginal person, please specify: <input type="checkbox"/> Status Indian/First Nation Band #: _____ <input type="checkbox"/> Non-Status Indian/First Nation <input type="checkbox"/> Métis <input type="checkbox"/> Inuit  Alberta Education is collecting the personal information in the section above 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 First Nations, Métis and Inuit Learner success. <i>For further information or if you have questions regarding the collection of this information please contact the First Nations, Métis and Inuit Education Division, Alberta Education at 780-415-9300 or toll-free 310-0000.</i>															
<b>SECTION 23</b> Pursuant to Section 23 of the Canadian Charter of Rights and Freedoms Citizens of Canada <ul style="list-style-type: none"> <li>whose first language and still understood is French; or</li> <li>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</li> <li>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.</li> </ul> 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 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? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Do not know B. If yes, do you wish to exercise your right to have your child receive a French first language (Francophone) education? <input type="checkbox"/> Yes <input type="checkbox"/> No															
<b>STUDENT CONTACTS</b> Student lives with (Complete ALL sections that apply) <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other (specify) _____ Does child have CFS worker? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, <input type="checkbox"/> check if completed Contact and Responsibility form is attached <input type="checkbox"/> Sibling(s) enrolled at this school Name(s) including last name (if different) _____															
<b>Primary Contact Name:</b>						<b>Contact 2 Name:</b>									
Relationship to student:						Relationship to student:									
In Emergency, call first <input type="checkbox"/> <input type="checkbox"/> Has Legal Custody						In Emergency, call first <input type="checkbox"/> <input type="checkbox"/> Has Legal Custody									
Mailing Address:						Mailing Address:									
E-mail Address:						E-mail Address:									
Marital Status:						Marital Status:									
Daytime Contact Phone No.:						Daytime Contact Phone No.:									
Cell/Pager No.:						Cell/Pager No.:									
<b>Contact 3 Name:</b>						<b>Contact 4 Name:</b>									
Relationship to student:						Relationship to student:									
In Emergency, call first <input type="checkbox"/> <input type="checkbox"/> Has Legal Custody						In Emergency, call first <input type="checkbox"/> <input type="checkbox"/> Has Legal Custody									
Mailing Address:						Mailing Address:									
E-mail Address:						E-mail Address:									
Marital Status:						Marital Status:									
Daytime Contact Phone No.:						Daytime Contact Phone No.:									
Cell/Pager No.:						Cell/Pager No.:									
<b>MEDICAL / EMERGENCY INFORMATION</b> <b>In case of illness, accident, inclement weather or emergency school closure, please give the name and phone numbers of a local person to contact if we are unable to reach parent or legal guardian:</b>															
Name				Home Phone			Business Phone			Cell Phone					
<b>FAMILY DOCTOR</b>				<b>PHONE</b>			If we are unable to reach you, in the event of a situation requiring medical attention, may we take what we consider to be reasonable action? <input type="checkbox"/> Yes <input type="checkbox"/> No If NO, what do you wish us to do? _____ _____ _____								
Please advise of any severe medical issues we should be aware of: <i>Note: Medical information may be shared with child's bus driver</i>															
Alberta Health Care No. (optional) _____															
<b>DECLARATION</b> I hereby certify that the information on this form is correct to the best of my knowledge as of this date. I acknowledge that it is my responsibility to inform the school of any changes to the above-noted information.										M	D	Y	Signature of Parent/Legal Guardian OR Adult Student over 18 years <b>X</b>		

# PARENT/LEGAL GUARDIAN CONSENT

Important Information - please review carefully

## 1. CASL Consent:

In order to keep parents informed, Foothills School Division No. 38 and its schools would like to continue to send parents/guardians electronic communications (emails) that may include information about offers and promotions related to Division, school and school council activities such as:

- offers to purchase goods, products, and services such as school apparel, yearbooks, school photos, field trips, and hot lunch programs;
- advertisements for school activities, events, programs, and services for which there is a fee (e.g. field trips, fine arts performances, etc.); and
- school and school council fundraising activities that support our schools, students, and programs.

In accordance with Canada's Anti-Spam Law (CASL), your consent to receive the electronic communications described above is required.

**PLEASE NOTE:** If you do not consent, you may not receive some important electronic communications, which may affect your child's involvement in some school activities.

Yes, I consent to receiving these electronic communications at the following email address/es:

No, I do not consent to receiving these electronic communications

You may withdraw your consent at any time by contacting your child's school. Alternatively, you may also write Foothills School Division No. 38 at 120 - 5th Ave. SW, P.O. Box 5700, High River, AB, T1V 1M7.

## 2. Photograph/Media Consent:

I hereby provide consent to Foothills School Division No. 38 to photograph, video/audio tape, or interview my child, and to post any personal information herein contained on Division/school websites, social media accounts, or in promotional materials/advertisements. I understand that personal information posted on these sites could be copied, altered, or moved to another site by anyone who visits these sites.

YES, I consent for my child to be (check all boxes that apply):

Photographed/video taped/ audio taped by FSD No. 38  Interviewed by FSD No. 38

I hereby provide consent to FSD No. 38 to permit media and/or other outside educational organizations to film, photograph, video conference, make an audio/video recording, or interview my child at non-public events for use outside the school community, while my child is under the supervision of FSD No. 38. I understand that this means that a creative work, photograph, video conference, audio/video recording, interview, or likeness of my child may be collected, used, reproduced, or broadcast by media or an outside educational organization.

YES, I consent for my child to be (check all boxes that apply):

Photographed/video taped/audio taped by media  Interviewed by media

## 3. Copyright Release:

I hereby provide consent to Foothills School Division No. 38 to use, display, or reproduce any artwork, written material or creative work created or authorized by my child through school activities. I understand that this material or creative work may be used by FSD No. 38 in school/Division displays, events, websites and publications. I understand that my child may be identified as the author of the work by name and grade.

YES, I authorize FSD No. 38 to (check boxes that apply):

Publish/reproduce works by my child  Display works by my child

### Freedom of Information and Protection of Privacy Act (FOIP Act) Collection of Personal information Notice under s. 33 of the FOIP Act

The information collected on this form as part of the school registration process is personal information as referred to in the Freedom of Information and Protection of Privacy Act ("FOIP Act"). This personal information is collected pursuant to the provisions of the School Act/Education Act and its regulations (e.g. for the establishment of a student record, determination of residency) and pursuant to section 33(c) of the FOIP Act as the collection is related directly to and is necessary to a school board's obligation to provide students with an education program that meets their needs and to provide a safe and secure school environment (e.g. program placement, determination of eligibility and/or suitability for provincial or federal funding, contact and health related information in the event of problems or emergencies). Personal information may also be provided to the Minister of Education for the purpose of carrying out programs, activities, or policies under his administration (e.g. research, statistical analysis).

In accordance with its obligations to collect, use and disclose personal information only in accordance with the FOIP Act, Foothills School Division No. 38 believes the uses of personal information, as described above and listed below, are part of a vital, healthy, and functioning school, and participation of all students in these activities is viewed as an important part of a student's education. The following are examples of how personal information may be used for school-related activities and are not intended to be an exhaustive list:

- The use of a student's photograph/image for school-related purposes including report cards, student records, student identification cards, school library cards, school yearbooks, newsletters, recognition, composites, displays at school or Division buildings, emergency, medical, legal, law enforcement and/or matters related to safety or security.
- The use of the student's name, school, grade, academic information, and/or written material for the school newsletter, yearbook, and/or other school publications.
- The use or disclosure of a student's name, school, grade, and/or academic information for the identification or assignment of classroom or teacher, use for class photos, collection of resources, recognition of birthdays, academic/athletic achievement, or community involvement, honour roll, graduation ceremonies, scholarships, or other school or Division awards.
- The use of a student's name, address, telephone number, grade, school, program, parent's/legal guardian's name and related contact information for the provision of transportation services, taking attendance, emergencies, field trips, planning and/or other school-related activities.
- The use of a student's name, school, grade, and/or photo for athletic events, fine arts productions, presentations, fairs, celebrations and/or school sponsored activities.
- The use of a student's photo/video/images taken by Division personnel of classroom or other school sponsored activities held within the school for educational purposes.
- The use by Division personnel of a student's photograph, video tape, audio tape and/or interview by Division personnel in connection with activities held outside of the school.
- The use of a student's name, address, telephone number, school, program, grade, parent's name and related contact information for the purpose of satisfaction surveys.
- The use of a student's name for individual class, club, team and/or group photos/videos/images taken at school sponsored activities for display in the school.
- The use of a student's name, photo/image, birth date, parent's/legal guardian's name, telephone number, address and any student health and/or relevant personal information to assist authorized individuals in responding to emergency situations relating to safety and security, for law enforcement purposes and other legal requirements, and to assist those who have severe or life-threatening medical or other conditions.
- The use of photos and/or videos of classroom activities by media or other organizations.

**Note:** Events that are open to the general public are considered public events. Foothills School Division No. 38 cannot control or prevent the further distribution or use of photos, videos, images or other personal information by those who attend.

If you have any concerns or questions with respect to the collection or use of personal information, please contact your school principal or:

#### Superintendent of Schools

Foothills School Division No. 38  
129 4th Ave. SW, Suite 300  
PO Box 5700, High River, Alberta T1V 1M7

Phone: 403-652-6501  
Fax: 403-652-4204  
Email: communications@fsd38.ab.ca

I have read and completed the information contained on this page, and understand the nature of the activities for which I have provided consent.	M	D	Y	Signature of Parent/Legal Guardian OR Adult Student over 18 years
				<b>X</b>