

2024 - 2025 Kindergarten Registration

Student Name:				
Parent Name & Phone Number:				
Please number your choices in order of preference:				
 Morning Class (Monday to Friday) Monday / Wednesday / Scheduled Fridays Tuesday / Thursday / Scheduled Fridays All Day Everyday (Mon-Fri) - \$325 per month 				
Has your child completed a speech, medical and/or behavioural assessment? □no □yes (Please attach a copy) Do you have any speech, medical and/or behavioural concerns about your child? Please specify:				
Would you like your child to attend one orientation afternoon during May or June? □no □yes				
OFFICE USE ONLY				
Date Returned:				

Northern Gateway Public Schools 2024-25 STUDENT REGISTRATION FORM

Registration Checklist:

Please download and complete the attached form. The form may be printed, completed and signed manually, or completed and signed digitally in Adobe Reader.
Once the form has been completed, please sign and initial the form where indicated.
Proof of residence is required to register for school. Parents will be required to provide a copy of their legal address to the school. Proof of residence can be verified with any bill or agreement that proves that this location is the student's legal home address (blue or green sign number) or street address. It can be in the form of a tax notice, lease agreement or a power or cable bill.
Legal proof of a student's name and age is required to register for school. Proof of name and age can be provided via a copy of a birth certificate, permanent residency document, Canadian citizenship document or passport.
If you require bus transportation please apply online at ngps.ca, <u>Busing and Transportation</u> .
Submit your registration form including: completed, signed application, proof of residence, and proof of student's name and age to the school. Email, mail or submit your signed application and proof documents in person, to the school.
ke Appointments: se be advised that an intake appointment may be required for new students.







STUDENT REGISTRATION 2024-25

PLEASE READ THIS INFORMATION BEFORE COMPLETING THE REGISTRATION FORM

This registration form is a legal document. Before a student can be registered by a school, a student registration form must be completed in its entirety and signed by the parent/legal guardian or by the student (if living independently). The student registration form is used to enroll a student who is new to Northern Gateway Public Schools, who is returning to the division, or who is transferring to a school within the division. A student cannot be registered without a copy of a legal document (birth certificate, permanent residency document, Canadian citizenship document, or passport) that provides proof of legal name and age.

OFFICE USE ONLY				
Student ID #	A	ASN # (9 digits)		
School Grade	Room	Date of Registration	n (MM/DD/YYYY	
A copy of the following is attached: Birth Certificate	Residency Document	Canadian Citizensh	hip Document 🔲 Passport	t
If applicable, a copy of the legal guardianship/custody or	der is attached: 🔲 Yes 🛘	■No		
STUDENT INFORMATION Print the student's legal surname (last name) and given name(s) below. These are the names on the student's birth certificate or adoption papers. If the student uses a different first name, there is a space at the end of this section for preferred name.				
Student's Legal Last Name Date of Birth (MM/DD/YYYY)				M/DD/YYYY)
Student's Legal First Name			Grade Level	
Student's Legal Middle Name(s)			Language Spoke	en at Home (if other than English)
Student's Preferred First Name			Gender	male 🛮 Unspecified
Student Citizenship or Immigrant Status				
☐ Canadian Citizen ☐ Child of Canad☐ ☐ Lawfully admitted to Canada for permanent residence		- ·	ermitted to Canada for perm t/guardian residing in anothe	nanent or temporary residence er country)
Phone Numbers (with area code) Home Phone		Cell Phone		
Tiome Frione		Cett i none		
Siblings	I		Tax	
Last Name	First Name		School	Age
Last Name	First Name		School	Age
Last Name	First Name		School	Age
Town Residence Address – Proof of Residence require		·	Durania	Death Code
Unit Number House Number Street Name	, , , , , , , , , , , , , , , , , , ,	own	Province	Postal Code
Rural Legal Land Description – Proof of Residence req	uired Township	Rang	ne.	W5
□ SE □ SW	Township	rang	ge	
Subdivision	Lot	Bloc	čk	Plan
Rural Address Sign Number				
Mailing Address (if different than student's residence) -				
Address or P.O. Box	Town	Prov	vince	Postal Code
School History Has the student ever registered with NGPS? Yes No Previous NGPS School				
Has the student ever registered with NGPS?				
Previous Non-NGPS School Attended Previous Sch	nool Phone Number	Previous School Distr	rict Previou	s School Province or Country
Medical Information (This information could be crucial to the well-being of the student, although we understand this information is optional)				
Are there any serious medical conditions about which you wish the school to be aware? Please indicate below. □ Diabetes □ Epilepsy □ Allergies (please specify) □ Hemophilia □ Heart Condition □ Asthma □ Other (please specify)				
Medical Notes (If more space is required, please attach	additional notes)			

For information on student transportation and/or to apply for busing please visit ngps.ca, Busing and Transportation, or contact the Transportation Department via email at transportation@ngps.ca or telephone at 1-888-785-3396. Proof of Residence is required i.e. Utility bill. Please identify each of the legal guardian(s) for the child being enrolled. The legal guardian is the parent or person legally appointed as PARENT/GUARDIAN guardian as defined in the Family Law Act, Corrections Act, Corrections and Conditional Release Act, Young Offenders Act, or Child, **INFORMATION** Youth, and Family Enhancement Act. Relationship to Student Last Name First Name Mr., Mrs., Ms., Dr., etc. FIRST LEGAL PARENT/GUARDIAN Home Phone **Business Phone** Cell Phone Email Address If address is different than the student's, please complete the section below Town Residence Address Street Address Town Province Postal Code Rural Legal Land Description □ NE □ NW Section Township W5 Range □ SW □ SE Subdivision Lot Block Plan Rural Address Sign Number Mailing Address (if different than student's residence) Address or P.O. Box Province Postal Code Relationship to Student Last Name SECOND LEGAL PARENT/GUARDIAN First Name Mr., Mrs., Ms., Dr., etc. Phone Numbers (with area code) Home Phone **Business Phone** Cell Phone Email Address the student reside with this individual? If address is different than the student's, please complete the section below Town Residence Address Street Address Town Province Postal Code пNF n NW Section Township Range W5 $_{\square}\:\mathsf{SE}$ □ SW Subdivision Block Plan Rural Address Sign Number lailing Address (if different than student's residence Address or P.O. Box Town Province Postal Code **EMERGENCY** An emergency contact person is someone who resides in the vicinity of the school, other than the student's parent or guardian, who can be called upon to quickly respond to an emergency situation if the parent or guardian is unavailable. CONTACTS Emergency Contact #1 Relationship to Student Home Phone **Business Phone** Cell Phone Emergency Contact #2 Relationship to Student Home Phone **Business Phone** Cell Phone Guardianship Rights and Student Protection Guardians of the student must be identified to ensure each party's rights are respected. If an order does exist affecting guardianship rights or custody or access rights, a copy of the order will be required to be placed in the student record. The court seal must be evident on the order. In rare instances, a child may be designated as "protected" if a court issues a restraining order under the Child Welfare Act, Divorce Act, Young Offenders Act or similar legislation. Does a legal document exist? ☐ Yes ☐ No Document Expiry Date (MM/DD/YYYY, if applicable) Type of Legal Document ☐ Access and/or Custody □ Parenting ☐ Guardianship □ Protection 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 the person to provide proof of the claim. Please ensure that the division has copies of all current orders or agreements addressing guardianship rights, responsibilities, and entitlements or otherwise affecting the custody of or access to your child.

□ No

Bus Transportation

Will the student require transportation on a Northern Gateway Public Schools' bus?

Family Circumstances	
Are there family circumstances you wish to share with the school? \square Yes \square No If yes, please make an appointment with the principal.	
Independent Student Status	
The School Act defines an independent student as someone who is (i) 18 years of age or older, or (ii) 16 years of age or older and (a) who is living ind who is party to an agreement under Section 57.2 of the Child, Youth, and Family Enhancement Act.	dependently, or (b)
Are you claiming status as an Independent Student under the definition of the School Act? ☐ Yes ☐ No	
Francophone Rights	
According to Section 10 of the <i>School Act</i> and Section 23 of the Canadian Charter of Rights and Freedoms, a parent or legal guardian who is a Canaright to have his/her children receive school instruction in French. This applies if the parent/guardian is a resident of Alberta and French was the first land is still understood, by at least one parent or one or more of the parents or one or more of their children have received/are receiving instruction in Language Program or school in Canada (this does not include a French Immersion program).	language learned,
Do you claim entitlement to a Francophone Education under the terms of the School Act? Yes No	
If you have answered yes, the Student Record Regulation requires Northern Gateway Public Schools to release demographic information about the to the local Francophone Education Board upon written request from the school jurisdiction.	e student and parent
If yes , do you wish to exercise your right to have your child educated in French? ☐ Yes ☐ No	
In Alberta, parents can only exercise this right by enrolling their child in a French First Language (Francophone) Program offered by a Francophone	e Regional Authority.
Indigenous Self-Declaration	
If you wish to identify that your child has First Nations, Métis or Inuit ancestry, please specify:	
☐ Status/First Nations ☐ Non-Status/First Nations ☐ Métis ☐ Inuit	
For further information, please refer to Alberta's First Nations, Métis or Inuit Student Self-Identification or contact Alberta Education at 780-427	7-8501
If you have questions regarding the collection of student information by the school board, please contact the Deputy Superintendent at 780-778-2 1-800-262-8674.	2800 or
Student Treaty Status and Residency	
Does this student have treaty status? ☐ Yes ☐ No Does this student reside on reserve? ☐ Yes ☐ No	
Does this student have treaty status? Yes No Does this student reside on reserve? Yes No Indian Registry Number (IRN – ten digit number)	
Indian Registry Number (IRN – ten digit number) Name of Reserve	
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electronic media, and advertising or promotional materials.

I hereby give Northern Gateway Public Schools permission to use, publish, display, and copyright any work, written material, or creative work created or authored by my child through school activities. I understand that artwork, written material, or creative work may be used by Northern Gateway Public Schools in division or school displays, publications (including yearbooks), websites, social media, other electronic media, and advertising or promotional materials. I understand that Northern Gateway Public Schools may make minor edits as deemed appropriate.

I understand that consent can be revoked at any time by written notification provided to my child's school. Further details can be found in our FOIP and Media Consent document.

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Conseni	TOP	'ost Persor	nal Information

Northern Gateway Public Schools requests consent to post personal information (including but not limited to first name, last name, grade, photographs, video, audio, award recognition, and school related activities) to external websites, social media, media publications (including yearbooks), and promotional materials. I understand that my signature below indicates my consent.

I understand that once provided, consent, in whole or in part (e.g. last name or photo, etc.), can be revoked at any time by written notification provided to my child's school, acknowledging that although photos/videos will be removed from websites and social media accounts, it may not be possible to remove all traces of personal information from the Internet.

Further details can be found in our FOIP and Media Consent document.

Signature		

Policies and Regulations

If the hyperlinked documents are unavailable for any reason, information related to the sections above is available at your school in paper format. Please ask your school secretary or principal.

Collection and Use of Personal Information Disclaimer

The information requested on this form is being collected pursuant to the *School Act*, Section 23, A.R. 71/99 and the *Freedom of Information and Protection of Privacy (FOIP) Act*, Sections 33(c), 39(1)(b), and 40(1)(c). Information acquired through this form is kept secure and access is restricted. In accordance with the Student Record Regulation, this form will be placed in the student's record file.

If you have any questions regarding this request for individual student information and about our use or disclosure of student information, please contact the school or Northern Gateway Public Schools' FOIP Coordinator at 1-800-262-8674.

DECLARATION	I am the legal guardian or the independent student referred to in this registration form. I have read and understand the information regarding guardianship and I have identified all guardians for this student. I hereby certify the foregoing information to be true, correct, and complete.			
First Parent/Guardian Print Name		Signature	Date	
Second Parent/Guardian Print Name		Signature	Date	