



## REGISTRATION PACKAGE

**(A COPY OF YOUR CHILD'S BIRTH CERTIFICATE MUST BE PROVIDED TO THE SCHOOL IN ORDER TO COMPLETE THE REGISTRATION PACKAGE)**

Indicate which school your child will be attending:

### Kindergarten Registration

Has your child received additional support (e.g. Cause & Effect, PUF etc.)? Y \_\_\_ N \_\_\_  
 If **yes**, please contact the school to determine eligibility for full day program.

\_\_\_ **Banff Elementary School (Kindergarten)**

Kindergarten Options: English Full Day \_\_\_  
 English Half Day \_\_\_  
 Full Day (Half Fr. Imm/Half English) \_\_\_

\_\_\_ **Elizabeth Rummel School (Kindergarten)**

Kindergarten Options: English Full Day \_\_\_  
 English Half Day \_\_\_  
 Full Day (Half Fr. Imm/Half English) \_\_\_  
 Fr. Imm Full Day \_\_\_  
 Fr. Imm Half Day \_\_\_

\_\_\_ **Exshaw School (Kindergarten)** English Full Day \_\_\_

*\*School administration reserves the right to balance classes and placement options based on developmental readiness/need and numbers.*

### Grade 1-12 Registration

- |   |                      |  |
|---|----------------------|--|
| ___ <b>Banff Community High School (Grade 9 – 12)</b>   | <b>Grade</b> ___     |  |
| ___ <b>Banff Elementary School (Grade 1– 8)</b>   | <b>Grade</b> ___     |  |
| ___ <b>Canmore Collegiate High School (Grade 9 – 12)</b>  | <b>Grade</b> ___     | <b>Fr. Imm Grade</b> ___ * available in Grade 9 only |
| ___ <b>Elizabeth Rummel School (Grade 1 – 3)</b>  | <b>Eng Grade</b> ___ | <b>Fr. Imm Grade</b> ___                             |
| ___ <b>Exshaw School (Grade 1 – 8)</b>  | <b>Grade</b> ___     |  |
| ___ <b>Lawrence Grassi Middle School (Grade 4 – 8)</b><br>(French Immersion option upon requirements met) | <b>Eng Grade</b> ___ | <b>Fr. Imm. Grade</b> ___                            |

**Will your child need to be bused?** Yes \_\_\_ No \_\_\_ If so, call transportation at 403-678-5545.

**Office Use Only:**  
 Date Received: \_\_\_\_\_ Student Name: \_\_\_\_\_

**Part A: Demographics**

Birth Certificate – Copy Received: Yes \_\_\_ No \_\_\_ If No, Explain \_\_\_\_\_

AB. Health Care # Received: Yes \_\_\_ No \_\_\_ If No, Explain \_\_\_\_\_

Medical Alert: Yes \_\_\_ No \_\_\_

\_\_\_\_\_

**Part B: Settlement Services Referral** Yes \_\_\_ No \_\_\_





# Canadian Rockies Public Schools Student Registration Form



C.R.P.S. Student I.D.

Alberta Learning Student I.D. Number

Legal Surname

Legal Given Name(s)

Birthdate

Registration Date

Y Y Y Y M M D D

(M)ale / (F)emale / (X)Unspecified

Y Y Y Y M M D D

Grade

### Vital Statistics Document:

Type

Number

### Student Also Known as:

Surname

Given Name

### Student Current Mailing Address:

Address Line 1

Box number

City/Town

Province

Postal Code

Area Code

Phone #

### Student Permanent Mailing Address: (If different from above)

Address

City/Town

Province/State

Country

### Citizenship if not Canadian:

Citizenship /

**Immigration Status** (A copy of the student's birth certificate, passport, or visa / immigration documentation is required.)

Canadian Citizen: Yes <input type="checkbox"/> No <input type="checkbox"/> (If no, check appropriate box below.)	
Birth country, if not Canada:	<b>Office Use Only</b>
<input type="checkbox"/> Temporary Resident (student has a study permit) International Student Fees Apply Student Visa Expiry Date:   Month           Day           Year	Citizenship Code: 5 Enrolment Codes: In Canada: 415 Outside Canada: 416
<input type="checkbox"/> A child lawfully admitted to Canada for permanent residency. Student presents permanent resident card.	Citizenship Code: 2
<input type="checkbox"/> A child living in Canada with a biological or adopted parent who is a Canadian Citizen.	Citizenship Code: 6
<input type="checkbox"/> A child living in Canada with a biological or adopted parent who has Landed Immigrant Status or Study Permit or Work Permit. Proof of parent's documentation and copy of child's passport required.	Citizenship Code: 7
<input type="checkbox"/> A step-child of a Canadian; student presents passport and study permit. Biological or adopted parent provides passport and proof of application for permanent residency and fee payment to Citizenship and Immigration Canada.	Citizenship Code: 9 Enrolment Code: 417
<input type="checkbox"/> A step-child of a Temporary Foreign Worker; student presents passport and study permit. Biological or adopted parent provides passport; step-parent provides passport and work permit.	Citizenship Code: 9 Enrolment Code: 418

**Parent/Guardian Information:**

Resides with

Relationship

Mother's Name

E-Mail Address \_\_\_\_\_ Cell Number \_\_\_\_\_

Mother's Address (only if different from student's address)

Mother's Employer & Phone Number

Father's Name

E-Mail Address \_\_\_\_\_ Cell Number \_\_\_\_\_

Father's Address (only if different from student's address)

Father's Employer & Phone Number

**Emergency Information (other than parents):**

Emergency Contact #1 and Phone Number

Street Address

Emergency Contact #2 and Phone Number

Street Address

Doctor / Phone #

AB Health Care #

**Medical Information:**

**Illness / Allergies / Medication**

Please Specify: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1. Brother(s) – Names(s) and age(s) \_\_\_\_\_  
Sister(s) – Name(s) and age(s) \_\_\_\_\_
2. Name of person(s) **NOT** authorized to take children from the school:  
\_\_\_\_\_

**Learning Services**

3. Has your child ever received services to support their learning differences/challenges? Yes / No
4. Has you child ever received an individualized or specialized program (eg. IEP, IPP, SLP)? Yes / No
5. Has your child had:

A Vision Check	Yes / No	Date _____
A Hearing Check	Yes / No	Date _____
Physio Therapy Support	Yes / No	Date _____
Speech Therapy	Yes / No	Date _____
Occupational Therapy	Yes / No	Date _____

**Francophone Rights**

According to the *School Act and section 23 of the Canadian Charter of Rights and Freedoms*, a parent or legal guardian who is a Canadian citizen has the right 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 language learned, and is still understood, by at least one parent; **or** one or more of the parents, **or** one of their children received, **or** are receiving instruction in a French first language program **or** school in Canada (this does not include a French Immersion program).

6. Do you claim entitlement to a francophone education under the terms of the *School Act*?  Yes  No
7. If YES, do you wish to exercise these rights?  Yes  No

If YES, please contact the local Francophone School Divisions.

**Aboriginal Self-identification**

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

8.     First Nation (status)         First Nation (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 Canadian Rockies Public Schools, please contact the Canadian Rockies Public Schools Superintendent at 403-609-6070.

Band Name \_\_\_\_\_ Band ID (3 Digits) \_\_\_\_\_ Treaty ID (7 Digits) \_\_\_\_\_

**English as a Second Language (ESL) Eligibility:**        **ESL students are identified as Canadian-born or foreign students.**

**A Canadian student is eligible for ESL support when the primary language spoken at home is a language other than English.**

9. Is your Child within this category? \_\_\_\_\_ Yes \_\_\_\_\_ No. If Yes, what language is spoken at home \_\_\_\_\_

**A Foreign-born student is eligible for ESL support when the student has recently immigrated to Canada.**

10. Is your Child within this category? \_\_\_\_\_ Yes \_\_\_\_\_ No. If Yes, what language is spoken at home \_\_\_\_\_

**Independent Student Status**

**The Alberta Education Funding Manual defines an independent student as someone who is: (i) between 16 years of age and less than 18 years of age who resides in Alberta and has a parent that resides in Canada; or (ii) is an independent student who is between 18 years of age and less than 20 years of age and who resides in Alberta.**

11. Are you claiming status as an "Independent Student" under the definition of the School Act? \_\_\_ Yes \_\_\_ No

**The following information is very useful in our understanding of your child.**

12. Did your child attend:

- |  |          |
|--|----------|
| Jr Kindergarten  | Yes / No |
| Pre-School   | Yes / No |
| Daycare  | Yes / No |
| Dayhome  | Yes / No |
| Taken Care of by Family Member<br>(parent, grandparent, aunt, uncle) | Yes / No |

**DECLARATION BY PARENT/GUARDIAN**

I hereby certify the foregoing information to be true, correct, and complete.

Signature of Parent/Guardian : \_\_\_\_\_ Date: \_\_\_\_\_

**Freedom of Information and Protection of Privacy Act (FOIP)**

The personal information collected on this form is part of the district registration process and is authorized under the provisions of the *School Act* and its regulations and also under Section 33(c) of the *FOIP Act*. All personal information collected during the registration process and during the course of the school year will be used to provide an educational program and ensure a safe and secure school environment. If you have any questions regarding the collection or intended uses of this information please contact the school principal.



## Additional Registration Information

Child's Name \_\_\_\_\_

Select the appropriate custodial arrangement that applies to your situation

Please initial

- \_\_\_\_\_ Biological/adoptive parents residing together (consent can be signed by either biological parent)
  
- \_\_\_\_\_ Biological/adoptive parents not residing together – sole custody (consent signed by sole custody parent, document must be attached)
  
- \_\_\_\_\_ Biological/adoptive parents not residing together – joint custody (consent signed by both parents)
  
- \_\_\_\_\_ Legal guardian - court order (consent signed by court appointed legal guardian; documentation needed)

I/we _____	and	_____
(Print parent/guardian name)		(Print parent/guardian name)
_____		_____
(Signature)		(Date)
_____		_____
(Signature)		(Date)



## **MEDICAL TREATMENT RELEASE**

The undersigned \_\_\_\_\_ being the parent/guardian of  
(Parent/guardian name)  
\_\_\_\_\_, a student of the Canadian  
(Student name)

Rockies Public Schools, do hereby request and authorize personnel employed by the Canadian Rockies Public Schools to provide necessary first aid to the said student and, for so doing, this will serve as a release and indemnification of and from any action or inaction of any personnel of the Canadian Rockies Public Schools associated with rendering of first aid to the said student.

Further, the undersigned parents/guardians recognize and acknowledge that the personnel employed by the Canadian Rockies Public Schools who may, as a result of this request, be rendering first aid to the said student are not medical practitioners.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\*\*\*Please note: If prescribed medication is required to be administered on a daily basis at the school, please obtain the permission form from the office.

Thank You.



## Parent/Guardian Information Sheet Collection and Use of Personal Information

### ***Freedom of Information and Protection of Privacy Act (FOIP Act)*** ***Collection of personal information Notice, s.33 FOIP Act***

The FOIP Act sets controls and standards on how public bodies, such as school boards, collect, use and disclose personal information they have in their custody or under their control.

The FOIP Act requires that when school boards collect personal information directly from individuals the information is about, that these individuals be provided with the legal authority for the collection, be explained the purpose of the collection, how the information will be used and be provided a contact person should they have any questions relating to this activity.

The information collected as part of the school registration process is personal information referred to in the FOIP Act. This personal information is collected pursuant to the provisions of the School Act and its regulations (e.g. for the establishment of a student record, determination of residency) and pursuant to section 32(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 event of problems or emergencies).

Once the information is collected and compiled, Canadian Rockies Public Schools believes the uses listed below are part of a vital, healthy and functioning school and participation of all students is important and encouraged. Here are activities where information may be used.

- the use of a student's name, photo and comments in the school calendar, newsletter, yearbook, graduation book, or other school publication
- the taking of individual, class, team or club photos for school purposes and the use of student photos for the issuance of transit/bus transportation, library and student union passes
- the use of student names on artwork or other creative work or material of students displayed at school or school board sites or at a school or school board sponsored display in the community, provided the Copyright Release Form is properly completed
- the use of student names in honour rolls, work ethic, (listings), graduation ceremonies, scholarship or other awards within the school or school board
- the use of student names and academic information necessary for determining eligibility or suitability for provincial, federal or other types of awards or scholarships in the event the board applies on a student's behalf
- the use of student's names, related contact information and telephone numbers for absenteeism verification
- the taking of photos and/or videos of classroom activities, and their use by the media or other organization where students are not interviewed or identified by name. (Where individual students are identified or interviewed and the material will be used outside the school a separate and specific consent will be required. You will be contacted prior to this event taking place.) Please note that photos and/or videos of school activities that are open to the general public may be taken and used for purposes within and outside of the school
- the taking of photos/videos of classroom and other school activities by the school board where the material will be used within the school. (Where individual students are identified or interviewed and the material will be used outside the school, a separate and specific consent will be required. You will be contacted prior to this event taking place)

If you have questions or concerns with any of these uses of information, please notify the school principal in writing.



**Permissions and Consents**

As a result of changes in copyright and various other legislation, schools are required to get written permission from parents/guardians before any of the children’s work or photographic images can be displayed outside of school. We request that all parents read, initial subsections and sign this form.

I understand the production(s), work(s) may be shown at educational displays during open house, in-service sessions and other school related activities at school or school board sites or at school or school board sponsored displays in the community, the internet, or included in educational or promotional materials.

I hereby grant permission to Canadian Rockies Public Schools (for nonprofit, educational purposes) on behalf of my child, \_\_\_\_\_ to:  
(Child’s name)

(please initial all items)

\_\_\_\_\_ a) record, photograph and tape (audio, video, still) my child

\_\_\_\_\_ b) publicly display any of my child’s works,

\_\_\_\_\_ c) reproduce any of my child’s work, and

\_\_\_\_\_ d) be included in neighbourhood walking excursions under a staff member’s supervision.

\_\_\_\_\_ e) I give permission for my name and phone number to be shared with the School Council

\_\_\_\_\_ f) Canada Anti-Spam Legislation Consent (CASL): I consent to receive commercial electronic messages about school pictures, field trips, yearbook sales, food programs, event tickets, or similar events or offers to sell goods and services.

This permission form remains in effect for as long as my child remains at Canadian Rockies Public Schools or until I/we rescind the permission.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date



## Student and Parent Responsible Use Technology Agreement

Canadian Rockies Public Schools supports the use of information technology for learning. Members of the CRPS community are required to act ethically and responsibly in their use of technology and social media when such use relates to or may impact the school and its members. It is expected that the values of respect, fairness, responsibility and honesty are always demonstrated in communications and actions. A detailed [Code of Conduct](#) further articulates the responsibilities of all members and partners within CRPS. Our network and resources are provided for staff and students to promote educational excellence by facilitating resource sharing, innovation, creativity and communication. Community members must use these resources appropriately to enhance teaching and learning in a safe physical and emotional environment, practicing responsible digital citizenship. Electronic devices should be used to promote genuine learning, research and positive communication. Devices should be used at the appropriate time, with the teacher’s permission. They must not be a source of distraction or disruption of the teaching-learning environment. When not required by a teacher, personal electronic devices are to be kept out of sight and turned off. Devices must not be used to cheat, endanger, or violate another person’s reasonable expectation of privacy. The taking and/or sharing of images without the person’s permission is not permitted.

### User Agreement

Please initial the expectations below as a demonstration of understanding and commitment to this agreement.

Student Initials	Parent Initials	<b>Agreements</b>
		I understand that the appropriate use of digital and other technology can enhance my learning and will be part of the learning experience at CRPS.
		My use of digital technology will at all times be in line with school community values of respect, fairness, responsibility and honesty.
		I understand that this agreement covers the use of all digital devices on the school campus and at school events, regardless of ownership, including my own devices.
		Devices are permitted for learning. Unless authorized for use, I will keep my devices out of sight and turned off.
		I understand that failure to comply with this agreement may result in the loss of privileges, confiscation of my devices, or disciplinary action.

## Consequences of Unacceptable Use

1. Suspension or termination of computer privileges.
2. Additional disciplinary action determined at the school level and consistent with school and district policy on student behavior.
3. Referral to law enforcement agencies if required.

I understand that my digital access provided by CRPS through an email account, a cloud-based Google account and a Windows Server account will be suspended if I do not follow the CRPS [Code of Conduct](#). I have read and understood my responsibilities as a digital citizen and agree to abide by the statements outlined in this responsible use agreement.

Student Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_

As a parent or legal guardian, I have reviewed the above information and provide consent for Canadian Rockies Public Schools to provide digital access for my son/daughter for this school year.

Parent/Guardian Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### **FOIP Act Revised June 2016**

The Freedom of Information and Protection of Privacy Act (FOIP Act), which came into effect for School Boards on September 1, 1993, sets controls and standards on how public bodies, such as school boards, collect, use and disclose personal information that is in their custody and under their control. Any personal information you do provide is protected under Alberta's Freedom of Information and Protection of Privacy Act and will only be used for purpose for which it was collected.

**Permission for Transferring of Student Files** (to be completed by parent/guardian ONLY if student(s) transferring in from another school)



- Transferring from **inside** CRPS Division  
 Transferring from **outside** CRPS Division

**REQUEST FOR STUDENT RECORDS**

**Office use only:**  
**Date** \_\_\_\_\_  
**Attention: Student Records**

The pupil(s) listed below who was (were) formerly attending your school have registered with CRPS. Please forward any medical, psychological, and school record reports as soon as possible to the school address, which is toggled below:

<input type="checkbox"/> Alpenglow School 1800 – 8 <sup>th</sup> Ave. Canmore, AB T1W 1Y2	<input type="checkbox"/> Banff Elementary School Box 748, Squirrel St. Banff, AB T1L 1K1	<input type="checkbox"/> Elizabeth Rummel School 1033 Cougar Creek Drive Canmore, AB T1W 1C8	<input type="checkbox"/> Lawrence Grassi Middle School 610 – 7 <sup>th</sup> Ave Canmore, AB T1W 2H5
<input type="checkbox"/> Banff Community High School Box 748, 330 Banff Ave Banff, AB T1L 1K1	<input type="checkbox"/> Canmore Collegiate High School 1800 – 8 <sup>th</sup> Ave. Canmore, AB T1W 1Y2	<input type="checkbox"/> Exshaw School P.O. Box 40 Exshaw, AB T0L 2C0	

Student Name(s) and Current Grade(s)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Name of School(s) last attended

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Address of last School(s)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Alberta Education Identification Number(s)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

To be registered in English \_\_\_\_\_ French immersion \_\_\_\_\_

Permission is granted to send confidential files and any other information regarding the above noted student(s):

\_\_\_\_\_  
 Signature of Parent/Guardian and/or \_\_\_\_\_  
 Signature of student where the student is 16 years of age

School Authority \_\_\_\_\_

Date: \_\_\_\_\_