



Calgary Board  
of Education

Revised Dec 2012

# STUDENT REGISTRATION FORM

## Student Information Records System (SIRS)

This form must be completed for all new students who are registering in a Calgary Board of Education (CBE) school (K-12).

CBE ID # \_\_\_\_\_

Program \_\_\_\_\_

Full Day Kindergarten: ☐ Yes ☐ No

Address Verified ☐ Yes ☐ No

Entered by: \_\_\_\_\_ Date: \_\_\_\_\_

### STUDENT INFORMATION

#### DECLARATION OF RESIDENCY:

The student named below is a resident of the Calgary Board of Education as defined by the School Act.

☐ YES

☐ NO

See **Student Residency** on Page 4 of this form - **Important Information for Parents**

Has student named below ever registered in a Calgary Board of Education (CBE) school? ☐ Yes ☐ No

If yes, name the last CBE school attended: \_\_\_\_\_

Last Grade  
Completed

School Withdrawal Date

CBE Student ID Number

Alberta Ed ID Number

MM

DD

YYYY

**NOTE:** The student's Birth Certificate, Canadian Citizenship Certificate, Passport, Visa, Permanent Landed Immigrant document or other official document must be given along with this form in order to register. A photocopy will be placed in the Student Record.

Name of Official Document (specify): \_\_\_\_\_

Student's Legal Name

Surname \_\_\_\_\_

First Name \_\_\_\_\_

Middle Name \_\_\_\_\_

Student's AKA Name (A name by which the student is commonly known in the family and community)

AKA Surname \_\_\_\_\_

AKA Given Name \_\_\_\_\_

Birth Date

MM

DD

YYYY

Address

City

Postal Code

Phone Number

☐ Unlisted

Quadrant of City (please select one)

NW ☐ NE ☐ SW ☐ SE ☐

Residential District

Gender

☐ Male

☐ Female

### MEDICAL INFORMATION (Note: The CBE is not allowed to collect Alberta Health Care numbers as per the Health Information Act.)

If the student's attendance at school may be affected by an existing medical or physical condition, it is your responsibility to complete and submit the Student Physical or Medical Condition form that is available from the school.

Does your child have any medical or physical conditions that may affect his/her attendance at school? ☐ Yes ☐ No

If Yes, please give a Brief Description \_\_\_\_\_

Have you completed the Student Medical or Physical Condition form? ☐ Yes ☐ No

### SCHOOL INFORMATION

Name of school at which student is registering

Grade Entering

Start Date

MM

DD

YYYY

Are you registering in a French Immersion program? ☐ No ☐ Yes If yes, are you registering for: ☐ Early Immersion **OR** ☐ Late Immersion?

Name of last school attended

Reason for leaving last school

Grade Completed

School Withdrawal Date

MM

DD

YYYY

Was the student suspended or expelled from the last school? ☐ Yes ☐ No

If yes, was the suspension resolved? ☐ Yes ☐ No

(If the suspension has not been resolved, refer to Student Services - Suspensions)

If the suspension has been resolved, please provide further information.

Address of last school (If outside CBE)

City

Province

Postal Code

Country

Phone Number of last school -

Fax Number of last school -

Office Use Only SIRS \_\_\_\_\_ Fees \_\_\_\_\_ Codes \_\_\_\_\_ Request Records \_\_\_\_\_

## INDEPENDENT STUDENT STATUS

Students 18 years of age and older, or "independent" under the School Act:

Any student 18 years of age and older **or** 16 years of age and older **and** considered legally "independent" under CBE policy may complete this form and register in the Calgary Board of Education School District without parental consent. **Proof of independent status must be presented.**

Are you declaring independent status? ☐ Yes ☐ No **If Yes, please attach proof of independent status (see Regulation).**

## PARENT/GUARDIAN INFORMATION (PLEASE PRINT)

**INFORMATION MUST BE PROVIDED FOR PARENTS. PLEASE PROVIDE A MINIMUM OF TWO EMERGENCY CONTACTS.**

<b>1</b> <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Step-Mother <input type="checkbox"/> Step-Father <input type="checkbox"/> Other _____			
<input type="checkbox"/> Ms. <input type="checkbox"/> Mr. <input type="checkbox"/> Miss <input type="checkbox"/> Mrs. <input type="checkbox"/> Dr.			
<input type="checkbox"/> Sole Custody <input type="checkbox"/> Shared/Joint Custody/Guardian <input type="checkbox"/> Access			
Is this person an EMERGENCY contact? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Last Name		First Name	
Address			
City	Province	Postal Code	Country
Home Phone Number (   )		Business Phone Number (   )	
Cellular Phone Number (   )		Fax Number (   )	
Email:			

<b>2</b> <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Step-Mother <input type="checkbox"/> Step-Father <input type="checkbox"/> Other _____			
<input type="checkbox"/> Ms. <input type="checkbox"/> Mr. <input type="checkbox"/> Miss <input type="checkbox"/> Mrs. <input type="checkbox"/> Dr.			
<input type="checkbox"/> Sole Custody <input type="checkbox"/> Shared/Joint Custody/Guardian <input type="checkbox"/> Access			
Is this person an EMERGENCY contact? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Last Name		First Name	
Address			
City	Province	Postal Code	Country
Home Phone Number (   )		Business Phone Number (   )	
Cellular Phone Number (   )		Fax Number (   )	
Email:			

<b>3</b> <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Step-Mother <input type="checkbox"/> Step-Father <input type="checkbox"/> Other _____			
<input type="checkbox"/> Ms. <input type="checkbox"/> Mr. <input type="checkbox"/> Miss <input type="checkbox"/> Mrs. <input type="checkbox"/> Dr.			
<input type="checkbox"/> Sole Custody <input type="checkbox"/> Shared/Joint Custody/Guardian <input type="checkbox"/> Access			
Is this person an EMERGENCY contact? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Last Name		First Name	
Address			
City	Province	Postal Code	Country
Home Phone Number (   )		Business Phone Number (   )	
Cellular Phone Number (   )		Fax Number (   )	
Email:			

<b>4</b> <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Step-Mother <input type="checkbox"/> Step-Father <input type="checkbox"/> Other _____			
<input type="checkbox"/> Ms. <input type="checkbox"/> Mr. <input type="checkbox"/> Miss <input type="checkbox"/> Mrs. <input type="checkbox"/> Dr.			
<input type="checkbox"/> Sole Custody <input type="checkbox"/> Shared/Joint Custody/Guardian <input type="checkbox"/> Access			
Is this person an EMERGENCY contact? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Last Name		First Name	
Address			
City	Province	Postal Code	Country
Home Phone Number (   )		Business Phone Number (   )	
Cellular Phone Number (   )		Fax Number (   )	
Email:			

## CUSTODY OR GUARDIANSHIP INFORMATION

Student PRIMARILY lives with: ☐ Both parents ☐ Mother ☐ Father ☐ Legal Guardian ☐ Other (specify)

**NOTE:** If a custody order or any other legal document governing the custody or guardianship of your child exists, a copy or the most recent custody document must be placed in the student record.

Name and date of most current Legal Document \_\_\_\_\_ Attach copy ☐

## SIBLING INFORMATION (OPTIONAL)

**NOTE:** The provision of sibling information is optional and is collected for communication purposes.

Do you have other children attending CBE schools? ☐ No ☐ Yes (If yes, If yes, please list name(s), school(s) and grade(s))

Name:	Grade	Name:	Grade
School Attending:		School Attending:	
Name:	Grade	Name:	Grade
School Attending:		School Attending:	

## CHILD CARE PROVIDER (IF APPLICABLE)

Name:

Phone Number(s): ☐ Home ( ) ☐ Business ( ) ☐ Cell ( )

Email Address:

## CITIZENSHIP

Is the named student a Canadian Citizen? ☐ Yes ☐ No Birth Country, if not Canada: \_\_\_\_\_

Citizenship, if not Canadian

☐ Permanent Resident/Landed Immigrant

☐ Child of a Canadian Citizen

☐ Child of a lawfully admitted permanent or temporary resident

☐ Student Authorization – Study Permit

Study Permit Expiry Date

MM	DD	YYYY

Has the CBE Admissions Office Assessment Centre assessed your child?

☐ Yes ☐ No

## ABORIGINAL ELIGIBILITY

If you wish to declare that you are an Aboriginal person, please specify:

☐ Status Indian/First Nations

☐ Non-Status Indian/First Nations

☐ Métis

☐ Inuit

Alberta Education is collecting this personal information 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 Aboriginal learner success.

For further information or if you have questions regarding the collection activity, please contact the office of the Director, Aboriginal Policy, Policy Sector, Information and Strategic Services Division, Alberta Education, 10155-102 Street, Edmonton, AB T5J 4L5. (780) 427-8501.

## ENGLISH AS A SECOND LANGUAGE (ESL) ELIGIBILITY

A student may be eligible for ESL support when the primary language spoken at home is a language other than English. ESL students can be Canadian born or foreign born.

Do you think your child qualifies for ESL? ☐ Yes ☐ No

Do you need assistance with interpretation? ☐ Yes ☐ No

Language mainly spoken at home: \_\_\_\_\_

## FRANCOPHONE ELIGIBILITY

The exercise of Francophone eligibility rights refers to instruction in a Francophone school, NOT a French Immersion school. According to the School Act and Section 23 of the Canadian Charter of Rights and Freedoms, a student is eligible for instruction in a Francophone school if at least one parent is a Canadian citizen and one of the following three conditions exists:

- Either parent's first language learned and still understood is French, or
- Either parent has received their primary school instruction in Canada, in French, or
- One or more of the parent's children has received or is receiving primary or secondary instruction in French in Canada

Does your child have Francophone eligibility? ☐ Yes ☐ No

If yes, and you wish to exercise your right, please contact the Conseil Scolaire Du Sud de l' Alberta at 403-686-6998. The Alberta Student Records Regulations requires that, if requested, the CBE will provide name, address, birth date, and parent's name of Section 23 Eligible students to the Francophone School District.

## TRANSPORTATION

The Calgary Board of Education will provide subsidized transportation in accordance with CBE policy for students who attend their attendance area school or directed school and who live within the transportation service area. The transportation service area means the designated zone within an attendance area in which the Calgary Board of Education provides subsidized transportation. Bus contracts can be acquired at any CBE school, or at the Education Centre, 1221 8<sup>th</sup> Street SW, in the Transportation Department.

## DECLARATION

I, the undersigned, hereby represent that I have the legal authority to register the child. I declare the information that I have provided on this form is complete and accurate. **I will notify the school of any changes to the information on this form.** I have also read and understand the "School District Use of Personal Information" section attached to this registration form". A **copy** of "Important Information for Parents" may be obtained from the school for future reference.

**Signature of Custodial Parent / Legal Guardian / Independent Student**

**Registration Date**

MM

DD

YYYY

**STUDENT RESIDENCY:** A student is considered to be a resident of the Calgary Board of Education if the custodial parent(s) / legal guardian(s) with day-to-day care of the student reside in the City of Calgary and at least one of them is not of the Roman Catholic faith OR if the student is an independent student residing in the City of Calgary and not of the Roman Catholic faith.

## IMPORTANT INFORMATION FOR PARENTS

The personal information requested on this form as part of the school registration process is collected under the authority of *Alberta's Freedom of Information and Protection of Privacy Act (FOIP)*, the *School Act* and its regulations, and the *Canadian Charter of Rights and Freedoms*, Section 23. This information will be used for the establishment of a student record, determination of residency, for a school board's obligation to provide students with an education program that meets their needs, to provide a safe and secure school environment and other purposes that relate directly to and are necessary for an operating program or activity, including 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 Learning for the purpose of carrying out programs, activities, or policies under his/her administration (e.g., research, statistical analysis). This information will be treated in accordance with the privacy protection provisions of the *FOIP Act*.

Revised Dec 2012



Calgary Board of Education

## **CALGARY BOARD OF EDUCATION**

### **School District Use of Personal Information**

The Calgary Board of Education collects personal information under Section 33(c) of Alberta's *Freedom of Information and Protection of Privacy (FOIP) Act*. Personal information is defined in Section 1(n) of the *FOIP Act* and includes an individual's:

- Name, address, telephone number;
- Birthdate, age, gender, race, national or ethnic origin, religious beliefs, family status, marital status, identifying number assigned to individual, health information including information about a mental or physical disability;
- School, program, grade,
- Photos, audio/video recordings
- Educational history
- Anyone else's opinion about the individual
- The individual's personal view or opinions, except if they are about someone else

The Calgary Board of Education collects, uses, and discloses personal information that is necessary for the operation of a school board as allowed under the *FOIP Act*. The following are **examples** of how personal information may be used by the CBE.

- Report cards
- Student records
- Student identification cards
- School library cards
- School yearbooks
- School newsletters
- Field trips
- Parent/guardian contact for absenteeism, emergencies, etc.
- Transportation services
- Classroom or program assignment
- Displays at schools or school district sites
- School sponsored activities such as fine arts productions, presentations, fairs, celebrations, clubs, sports activities
- To determine eligibility or suitability for an honour, award, scholarship, athletic program, etc.
- Law enforcement and or matters relating to safety and security

The school will contact parents/guardians on the occasions when consent is appropriate.

***Please note: Photos, videos or images of students attending or participating in school activities (e.g. sporting events, concerts, cultural programs, clubs, field trips, graduation or other ceremonies), that are open to the general public, may be taken by CBE staff, the public-at-large, including journalists, reporters, videographers and other members of the Media and used for purposes within and outside the school or school district. The CBE cannot control or prevent the further distribution or use of these photos, videos, images or other personal information by those who access the information.***

If you have any questions about the collection and/or the intended purposes of your personal information, please contact the school principal or the CBE FOIP Office at foip@cbe.ab.ca, or by mail to The Calgary Board of Education, 1221 – 8 St. SW, Calgary AB T2R 0L4.