



EVERGREEN CATHOLIC SEPARATE REGIONAL DIVISION NO. 2

BOX 4265, SPRUCE GROVE, ALBERTA T7X 3B4 TELEPHONE: 962-5627 FAX: 962-4664

STUDENT REGISTRATION for the 20____/20____ school year

For Office Use Only:

Student ID# _____
Alberta Education Student I.D. # _____
School Assigned to: _____

This information is collected and distributed in accordance with the Freedom of Information and Protection of Privacy (FOIP) Act, Sections 33(1) and 37. Your personal information will be protected as per Part 2 of the Act. For further information concerning the completion of the form, please contact your FOIP Coordinator at Evergreen CSRD No. 2, Box 4265, Spruce Grove, AB T7X 3B4. Telephone: (780)962-5627

STUDENT INFORMATION:

Legal Surname	First	Middle	Called first name	Grade	Sex	M___ F___
Preferred Surname (would be different from Legal Surname)				Home Phone Number	Birthdate	____/____/____ Year / Month / Day
Mailing Address					Birth Certificate	_____
City				Province	Postal Code	Religion: Catholic _____
911/Physical (rural municipal) Address: (example: 5 25162 Twp.Rd. 510)						Other _____
Legal Land Description: (example: Cherlyn Heights SE32-53-1-5)						<u>Any of the following:</u> Baptismal Certificate of parent/guardian ___ Baptismal Certificate of child ___ Confirmation Certificate of child ___ Letter from a priest testifying to the faith life of the parent and/or child ___

Subdivision Name	Section	TWP	Range	Meridian
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Student Alberta Health Care Number	Name of Doctor	Phone Number
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Emergency Contact Person (if parent/guardian unavailable)	Phone Number	Babysitter/Daycare	Phone Number
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Parent/Guardian/Emergency Contact

Student lives with (please check one):

Both Father only Mother only Guardian Living Independently Other*

*if Other, explain: _____

PARENT/GUARDIAN INFORMATION:

Father/Guardian:

Surname	First	Work: Phone Number Ext. #	Cell phone(s):	Religion: Catholic ___ Other ___
E-mail address: _____				

Address (if different from student above)

Mother/Guardian:

Surname	First	Work: Phone Number Ext.#	Cell phone(s):	Religion: Catholic ___ Other ___
E-mail address: _____				

Address (if different from student above)

SCHOOL HISTORY:

Previous School Name	Phone Number
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If YES, make arrangements to discuss this situation with the School Administration. You will be expected to provide legal documentation to support your request.

ABORIGINAL LEARNER DATA COLLECTION INITIATIVE:

If you wish to declare that your child is an Aboriginal person, please specify:

Status Indian/First Nations Non-Status Indian/First Nations Metis Inuit

Alberta Learning 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 in addition to other legislation applicable to the educational institution. 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 Learning, 10155 – 102 Street, Edmonton AB, T5J 4L5 (780) 427-8501.

Does the student have treaty status? ___ Yes ___ No

Does the student reside on a reserve? ___ Yes ___ No If yes, On which reserve does he/she reside? _____

Band of Membership: _____ Band No. _____ Family No. _____

Child Position No. _____

NOTICE TO PARENT OR GUARDIAN OF RELIGIOUS PERMEATION

The *Alberta Human Rights Act* requires a school board to give notice to a parent or guardian when courses of study, educational programs, institutional materials, instruction or exercises include subject matter that deals primarily and explicitly with religion. All of the schools in this district are Catholic Separate Schools, the essential purpose of which is to fully permeate Catholic theology, philosophy, practices and beliefs, the principles of the Gospel and teachings of the Catholic Church, in all aspects of school life, including in the Curriculum of every subject taught, both in and outside of formal religion classes, celebrations and exercises. Every course of study and educational program, institutional materials instruction and exercises will at all times, include subject matter that deals primarily and explicitly with religion.

DECLARATION BY PARENT, LEGAL GUARDIAN, OR STUDENT (ONLY IF STUDENT IS LIVING INDEPENDENTLY) :

I HEREBY CERTIFY THE INFORMATION PROVIDED ON THIS FORM AND ALL ADDENDUMS TO BE TRUE, CORRECT, AND COMPLETE.

SIGNATURE: _____

DATE: _____

