



# North East School Division

## Student Registration Form

Students Legal Name: \_\_\_\_\_  
First Middle Last

Students Preferred Name (if different than legal) \_\_\_\_\_  
First Last

Male  Female  not specified

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_  
Month Day Year

Primary Phone: \_\_\_\_\_ Student's Cell Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_

RR#/PO Box: \_\_\_\_\_ City/Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Land Location: Quarter \_\_\_\_\_ Section \_\_\_\_\_ River Lot \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_ Meridian \_\_\_\_\_

Name of last school attended: \_\_\_\_\_ Town/City: \_\_\_\_\_ Province: \_\_\_\_\_ Grade: \_\_\_\_\_

## Citizenship

Citizenship Country: \_\_\_\_\_ Province/Country of Birth: \_\_\_\_\_

Home Language: \_\_\_\_\_ 2<sup>nd</sup> Language: \_\_\_\_\_

**SK Resident:**  YES (A SK resident is someone who owns, rents or leases a residence in SK or resides with an immediate family member who is a SK resident)

**OR**

### Resident Type:

- Permanent Resident (granted permission to live and work in Canada without any time limit on the stay, not yet a Canadian Citizen)
- Refugee (seeking protection from former country)
- Student/Visitor Visa (A person who is lawfully in Canada for a temporary purpose such as work/study/visit & is not a Canadian citizen)
- Temporary Resident (has come to Canada legally for a temporary purpose and does not have Canadian citizenship)

Date of entry into Canada: \_\_\_\_\_ Date of entry into Saskatchewan: \_\_\_\_\_

## Voluntary Self-declaration

Aboriginal people are those who identify themselves to be First Nations (Registered/Treaty/Status Indian, Non-Status Indian), Metis or Inuit/Inuk. Based on this definition, do you consider yourself to be an Aboriginal person?  YES  NO

Which group do you belong to:  Inuit/Inuk  Metis  Non-status Indian  Status Indian

I reside:  On Reserve  Off Reserve

Reserve of Residence: \_\_\_\_\_ Band Affiliation: \_\_\_\_\_

## Transportation Information

**Transportation is provided for students residing within the attendance area of a school and who live more than one (1) kilometer from that school.**

Is this a **NEW** student registration:  YES  NO Student will come to school by bus:  YES  NO

### TRANSPORTATION CONSENT

I have read, understood and agree to follow [School Bus Safety](#) within the North East School Division.  YES  NO

## Alerts

Does this student have a severe or life threatening medical condition:  YES  NO  Not Applicable

If yes, please explain: \_\_\_\_\_

Does this student have any other medical condition that we should be aware of? \_\_\_\_\_

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## Guardian / Custody / Access

Is there an access and/or custody document(s) for your child?  YES  NO *If yes, please provide a copy to the school.*

Copy provided for student record

Expiry date (if applicable): \_\_\_\_\_

## Parent / Guardian Information / Communications

### Relationship:

Circle one → Father, Mother, Step-Father, Step-Mother, Guardian, Foster

Should this individual be contacted in case of emergency:  YES  NO

Name: \_\_\_\_\_

primary daytime  
contact number:

Work #: \_\_\_\_\_

Cell #: \_\_\_\_\_

Email: \_\_\_\_\_

Home Address: \_\_\_\_\_

*(if not the same as the student)*

YES I would like to receive information from the school/division via:  TEXT  EMAIL  BOTH

### Relationship:

Circle one → Father, Mother, Step-Father, Step-Mother, Guardian, Foster

Should this individual be contacted in case of emergency:  YES  NO

Name: \_\_\_\_\_

primary daytime  
contact number:

Work #: \_\_\_\_\_

Cell #: \_\_\_\_\_

Email: \_\_\_\_\_

Home Address: \_\_\_\_\_

*(if not the same as the student)*

YES I would like to receive information from the school/division via:  TEXT  EMAIL  BOTH

## Emergency Contacts / Billet Info

1. Emergency Contact Name: \_\_\_\_\_ Phone/Cell #(s) \_\_\_\_\_

2. Childcare provider: \_\_\_\_\_ Phone/cell#(s) \_\_\_\_\_

**RURAL STUDENTS:** (in case the buses do not run due to weather, bus failure or emergency, we require a billet home in town for your child).

Billet Name: \_\_\_\_\_ Phone/Cell #(s) \_\_\_\_\_

## Sibling Information

List any siblings / step-siblings (both older and younger):

Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Birthdate: \_\_\_\_\_

## Declaration

**Note:** Your child is not officially registered until legal documentation is brought directly to the school and verified by school personnel.

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.

Student Signature (if 16 or older) \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date: \_\_\_\_\_

The personal information requested on this form as part of the school registration process is collected under the authority of Saskatchewan's Local Authority Freedom of Information and Protection of Privacy Act (LAFOIP) for the establishment of a student record, determination of residency, to provide students with an education program that meets their needs, to provide a safe and secure school environment, for program placement, determination of eligibility and/or suitability for provincial or federal funding, to manage problems or emergencies, for reporting and providing statistics to the Minister of Education, and for other purposes that relate directly to and are necessary for the school's operating programs and activities. This information will be managed in accordance with the privacy protection provisions of the LAFOIP Act.

## FOR OFFICE USE ONLY:

Name and DOB Verification Documents:  Birth Certificate (spelling of name and DOB verified)

Do not take photocopies.  
Viewing the documents is  
all that is required.

Passport (Photo page & visa) or Immigration Document

Original or translated transcripts / recording document from former school

Certificate of Permanent Residence (PR Card)

Privacy consent form on file

Forms & documentation validated and collected by: \_\_\_\_\_

Technology Use consent form on file

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