



GOLDEN HILLS LEARNING ACADEMY 2021-2022 Student Registration Form

REGISTRATION DATE:		<input type="checkbox"/> Full Time Registration <input type="checkbox"/> Part Time (attending another school as well GHLA)	
Referral Y / N		School referred from:	
Have you previously attended a Golden Hills school Y / N School Name:			
STUDENT INFORMATION: It is important to fill out this section completely and accurately			
Legal First Name		Legal Middle Name	
Legal Last Name		Legal Last Name	
Preferred First Name		Preferred Last Name	
Birthdate (mm/dd/yy)		Sex M / F	Alberta Student Number
Entering Grade:			
Most Recent School Attended		<input type="checkbox"/> Currently attending <input type="checkbox"/> Previously attended	
Home Phone		Cell Phone	Work Phone
Student E-mail Address			
Current Mailing Address (where student is living currently) Rural - Box # / Legal land description / 911 address (blue sign) Urban - House address			
Rural / Street Address			
City / Town		Province	Postal Code
Permanent Mailing Address (if different than current mailing address)			
Rural / Street Address			
City / Town		Province	Postal Code
Learning Needs			
Special Condition (i.e. Learning Disability, etc.) Yes No		Knowledge & Employability (K&E) Student Yes No	
Individualized Program Plan (IPP) Yes No		Medical Condition Yes No	
Special Examination Accomodations Yes No If yes, please provide documentation			
Additional comments			
PARENT/GUARDIAN INFORMATION:			
Parent/Guardian #1 Legal Name		Relationship to student	
Address			
Town		Postal Code	
Home Phone	Cell Phone	Work Phone	
Email Address			
Parent/Guardian #2 Legal Name		Relationship to student	
Address			
Town		Postal Code	
Home Phone	Cell Phone	Work Phone	
Email Address			
Citizenship: Canadian <input type="checkbox"/> Landed Immigrant <input type="checkbox"/> Other (please specify) <input type="checkbox"/>		International Student: Yes <input type="checkbox"/> No <input type="checkbox"/> Student Visa _____ / _____ / _____ Expiry Date: month day year	
Independent Student: Yes <input type="checkbox"/> No <input type="checkbox"/> <i>An independent student is someone who is 18 yrs or older or 16 years of age and is living independently</i>			

Signature of Parent/Guardian/Student 18 yrs or older

Learning Academy Principal / Teacher

Student Name:

A copy of one of the legal documents listed below and must be provided at time of registration. Circle one:

- | | |
|--|---------------------------------|
| Canadian Birth Certificate | Temporary Resident Papers |
| Passport | Work or Study Permit |
| Canadian Citizenship Document | Adoption Papers |
| Permanent Resident/Landed Immigrant Document | Official Stats Canada Documents |

Francophone Education Eligibility Declaration

Pursuant to Section 23 of the Canadian Charter of Rights and Freedoms, citizens of Canada,

- whose first language and still understood is French; or
- who have received their primary school instruction in Canada in French have the right to have their children receive primary and secondary instruction in French; or
- of whom any child has received or is receiving primary or secondary school instruction in the same language.

In Alberta, parents can only exercise this right by enrolling their child in a French first language (Francophone) program offered by a Francophone Regional Authority.

A. According to the criteria above are you eligible to have your child receive a Francophone education? (circle one) Yes No

B. If yes, do you wish to exercise your right to have your child receive a Francophone education? (circle one) Yes No

Aboriginal Declaration

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

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

If student resides on a reserve, please provide the following: Band Number _____ and Treaty Number: _____

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 and over time 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

Catholic Residency

Your child is a resident student of the Separate Catholic School Division if his/her parent(s) is/are Catholic.

Is the child's Parent/Guardian #1 Catholic? (circle) Yes No Is the child's Parent/Guardian #2 Catholic? (circle) Yes No

Child resides with: Parent/Guardian #1 _____ Parent/Guardian #2 _____ Both _____

Should school correspondence regarding this child be sent to any other adult who has legal access to this student?

Yes No If Yes, please fill in the following information:

Name:

Address: _____ City: _____ Postal Code: _____

Relationship to Student:

Child lives with: Parent/Guardian # 1 Parent/Guardian # 2 Both Other (please specify) _____

Custody: In rare instances a child may be designated as "Protected" if a court has issued an order under the Child Welfare Act, the Domestic Relations Act, the Divorce Act, the Young Offenders Act, the Family Act, or is the subject of a custody or access order. If your child is subject to any such order or agreement, please indicate as directed below and contact the school principal.

Does such an order exist? (circle) Yes No If "yes", please discuss this situation with the school administration. Legal documentation will be required.

If other family circumstances are important for the school to know, please advise the principal. Questions in this part of the registration form are designed to assist in our effort to maintain good school-home communications. If you have difficulty responding to any of these, please speak to your school principal.

OFFICE USE ONLY: Declared Residency: _____

I hereby certify the foregoing information given is correct, and complete; to the best of my knowledge and belief.

Parent (Guardian) Signature _____ Date of Signature _____



Golden Hills School Division

Freedom of Information and Protection of Privacy (FOIP) Act

Golden Hills School Division is collecting personal information about you and your child with this Student Registration Form. This personal information is necessary to provide an educational program for your child and ensure a safe school environment for all students and staff.

Some of the ways the school or division may use personal information are listed below. The Information and Privacy Commissioner's office states that the division does not require written consent from you to:

- Share information with Alberta Education.
- Use a student's name, related contact information, and telephone numbers to check on a student who is absent.
- Take and use individual, class, team, club, or school videos/photos within the school community for internal school purposes as part of the delivery of educational programs or services (**not for external uses such as websites or brochures**).
- Use a student's name on artwork or material to be displayed at the school or other division sites.
- Use a student's name on lists such as an honour roll, scholarship, or other awards within the school or division.
- Use a student's name and academic information when the school wishes to apply for provincial and federal awards or scholarships on behalf of the student.

This is not a complete list, but it gives some examples of how the personal information may be used. Your child may attend or participate in school activities that are open to the general public. Some examples of these activities are sporting competitions, concerts, cultural programs, clubs, field trips, graduation, or other ceremonies. Photos and videos may be taken by members of the public including journalists and media reporters. The division cannot control or prevent the further distribution or use of these photos, videos, images, or other personal information.

Written consent is required to use a student's personal information for any purpose other than educational programming or the safety of students and staff. Written consent can be revoked at any time by notifying the school principal in writing. Please refer to the attached *FOIP Consent Form*.

In accordance with the Freedom of Information and Protection of Privacy (FOIP) Act, Golden Hills School Division is authorized and required under the provisions of the Education Act and its regulations to collect and use the personal information to provide an educational program and ensure a safe and secure school environment for students.

Under Section 39(1) of the FOIP Act, the school division may use personal information only (a) for the purpose for which the information was collected or compiled or for a use consistent with that purpose; (b) if the individual the information is about has identified the information and consented, in the prescribed manner, to the use; or (c) for a purpose for which the information may be disclosed to that public body under section 40, 42, or 43. Another use of personal information requires written consent. If no written consent is obtained, the personal information cannot be used or disclosed.

Please note that the signature on the student registration form does not indicate consent for the use of this information. If you have questions or concerns regarding the collection or intended uses of this information, please contact the school principal.

Your name, home phone number, home address and postal code are collected under the authority of section 33(c) of the *Freedom of Information and Protection of Privacy Act* (that information relates directly to and is necessary for an operating program or activity of a public body). This information will be used to provide an educational program and ensure a safe and secure school environment for students.

If you have any questions about the collection, contact the FOIP Coordinator, 435A Highway No. 1, Strathmore, Alberta T1P 1J4 or 403-934-5121 ext. 2024.



Golden Hills School Division

Freedom of Information and Protection of Privacy (FOIP) Act

FOIP Consent Form

It has become common practice for our students to be working to gather information, connect to other learners on projects and share their work or activities. Your child's name and image could appear on the school or school division's website, YouTube, or social media site and your consent is required. **Consent can be revoked at any time by notifying the school principal in writing.** The following are examples where written consent is required:

- Use of a student's name, photo, or video in external publications (such as a school website, local newspaper or media or a promotional brochure).
- Use class, team, club, or school videos/photos that are taken within the school community on the school external website or for marketing purposes.
- Use of a student's name on artwork/material to be displayed in the community.
- Video or audio recordings posted online (may include technologies such as social media and other emerging technologies).

Choose one of the following to indicate your voluntary consent for your child:

I consent for my child's information such as photographs, awards, scholarships, prizes, newsletter information, team lists, assignments or projects, art work, video and/or audio recording, interviews, school publications, advertisements, and promotional materials to be used by my child's school or by Golden Hills School Division

I do not give consent for my child's information such as photographs, awards, scholarships, prizes, newsletter information, team lists, assignments or projects, art work, video and/or audio recording, interviews, school publications, advertisements, and promotional materials to be used by my child's school or by Golden Hills School Division

Note: The Division cannot control how the information may be distributed, including print, broadcasts, photographs, and the Internet (for example, websites, online video and social media).

Note: The school and school division will not approve any provincial or national public media interviews involving students without the express consent of parents.

I, being the parent/legal guardian of the student named below, have read and understand the information provided.

Student's Name: _____ Grade: _____

School: _____

_____ Date: _____

Parent/Legal Guardian Signature(s) #1

_____ Date: _____

Parent/Legal Guardian Signature(s) #2

Note: Only persons having legal guardianship of the student may sign this consent form as parent or legal guardian.