

#### STUDENT INFORMATION – PLEASE PRINT

Legal Surname:		Legal First Name:						
Preferred Surname:	I	Preferred First Name:						
Legal Middle Name:	(	Gender: 🗌 Male 🗌 Female 🗌 Not Disclosed 🗌 Self-Identified						
Home Phone: 🗆 Un	mateu	If Self-Identified: 🗌 Two-Spirit 🔲 Genderqueer						
Date of Birth (year-month-day):		□ Gender Fluid □ Gender Nonconforming □ Intersex □ Non-Binary □ Trans □ Other						
Please list student's siblings in this school:								
Is the student currently expelled from any school or school board?   Yes  No								

# Parent/Guardian Registration Checklist

In all instances, ORIGINAL documentation must be presented.

#### □ Completed Registration Form

#### **Proof of Student's Age (present one original document from the list below)**

- Canadian Birth Certificate / Birth Registration Card
- Canadian Citizenship Card / Certificate / Passport
- Permanent Resident Card / Confirmation of Permanent Residence
- Letter of Admission from International Admissions

## □ Proof of Address (present one original document from the list below)

- Current Utility Bill (water, hydro, gas, home phone, cable, internet, property insurance)
- Government forms (i.e. Service Canada documents)
- Lease/Purchase Agreement/Tax Bill

Note: U U - accept a Driver's license as a Proof of Address.

## □ Proof of Immunization

 To be submitted directly to the Region of Waterloo Public Health either online at <u>https://e-immunization.regionofwaterloo.ca/</u> or calling 519-575-4400

## □ Proof of Custody

• Children must live with their parent(s) unless legal documentation supports an alternate living arrangement

#### □ Proof of Education

- Elementary students: please bring the most recent report card
- Secondary students: please bring the most recent transcript, report card or credit summary report (if available) and Principal to Principal Transfer Form (if from a Waterloo Catholic District School Board Secondary School)
- Notify school at time of registration if your child is registered currently in a specialized program such as French Immersion (FI), English as a Second Language (ESL), Specialist High Skills Major (SHSM) (include sector), International Baccalaureate (IB), or other programming
- Provide a copy of your child's supporting documents for identified resource assistance, if applicable

Information on this Registration Form is collected under the legal authority of the Education Act and its regulations, and in accordance with the Municipal Freedom of Information and Protection of Privacy Act. Information collected on this form will be used to establish the Ontario Student Record (OSR) and for other student and educational related purposes, such as registration, administrative, communication, data reporting and transportation. The information may also be retained independently of the OSR for Ministry of Education reporting purposes. Questions or concerns about the collection of data on this form should be directed to the Principal of the school or the Freedom of Information, Privacy and Records Information Management Officer, Waterloo Region District School Board.

STUDENT ADD	RESS INFOR	MATION						
Home Address:								
	Number	Street			Apt #			
	City / Town /	Village / Municipality			Province	Postal Code		
Mailing Address: S				lf NO, plea	se complete below			
Number Street				City / Town /	Village / Municipality	Province	Postal Code	-
TRANSPORTATI	ON ARRANO	GEMENTS FOR E	ELIGIBLE STU	JDENTS				
	-				eligible, visit <u>Bus Pla</u>	<u>nner</u> . If a student i	s eligible for boa	ard-
-funded transport				-	ropped off: er   D Dropped off at	Caregiver 🗆 Snec	ial Education Eli	igihle
				-				BIDIC
Pick up Address: _	Number	Street	City	/ Town / Village	e / Municipality	Province	Postal Code	-
Drop off Address:								-
	Number	Street	City	/ / Town / Village	e / Municipality	Province	Postal Code	
PREVIOUS SCHO	DOL INFOR	MATION						
Name of Previous	School:							_
Previous School A	ddress:					ruction:		_
Drevieve Cebeel D	e e vel i	City / Town / Village				Creder		
					r Transfer:			
Did the student ev	ver attend a V	Vaterloo Region D	istrict School	Board Schoo	in the past (includin	g International Lan	guages)? 🗆 Yes	□ No
If yes, name schoo	ol(s):							-
STUDENT LANG	UAGE, CITIZ	ZENSHIP AND IN	/IMIGRATIO	N INFORM	ATION			
Country of Birth:					da, Province of Birth			
Citizenship:					rrived in Canada:			
First Language:				Langua	ge Spoken at Home:			-
STUDENT MEDI								
(If this section is	s applicable	to the student,	, there may l	be addition	al forms to be com	pleted)		
Allergies or Health	n Concerns:							-
Are any of the not	ted health cor	ncerns life threate	ening? 🗆 Yes	□ No	Does the student r	equire an epi-pen?		)
VOLUNTARY FIR	RST NATION	, METIS AND IN	UIT SELF IDE	INTIFICATIO	DN			
If you wish to decl	lare that your	child is a First Na	tion, Metis or	Inuit person,	please check one of	the following boxe	S.	
First Nation		Metis		Inuit				
SPECIAL EDUCA	TION / IEP/	IPRC / ESL / ELI	D INFORMAT	ΓΙΟΝ				
Does your child re	eceive any spe	ecial education ass	sistance (elem	entary or sec	ondary)? 🗆 Yes 🗆			-
	-	-			glish Literacy Develo		ance? 🗆 Yes 🗆	No

ARENT / LEGAL GUARDIAN / E	MERGENCY CONTACT INFORM	/IATION			
Living With		/=0.00			
□ Both Parents □ Parent 1 □ P Custody	Parent 2 🗆 Legal Guardian 🗆 C.A.S	F&CS □ C	Other:		
	arent 2 🗆 Joint 🗆 Legal Guardian	□ C.A.S/F&0	CS 🗆 Other:		
If joint custody checked, please in	ndicate schedule: 🗆 Weekly 🗆 Bi-'	Weekly 🗆 N	Ionthly 🗆 Other:		
	nt custody: ts out custody and access to the stu				
□ No □ Yes (please prov	ide school with copy of legal docur	ment for OSR	)		
Contact 1 (Contact information	for self, if student is 18 years of ag	ge or older)			
Name:					
Last Name	First Name				
Relationship to Student:		Employer (	optional):		
	□ Lives with Student □ Has access		<ul> <li>Legal Guardian</li> <li>Has Access to Records</li> <li>Receives Email</li> </ul>	<ul> <li>Has Custody</li> <li>Receives Mail</li> <li>Speaks English</li> </ul>	
	Priority: (1-3)		Number:		
Cell Number:		Email Add	ress:		
Address: 🗆 Same as Student's H	ome Address				
Number Street		City / Town / V	illage / Municipality Prov	ince Postal Code	
Contact 2 Name:					
Lontact 2 Name: Last Name					
Relationship to Student:	Fmplove	er (optional):			
Check all applicable boxes	□ Lives with Student □ Has access	s to Student	Legal Guardian Has Access to Records		
Emergency/Attendance Conta	act Priority:	ird	Receives Email	Speaks English	
Home Number:	Priority: (1-3)	Business N	Number:	Priority	(1-3)
Cell Number:			ress:	-	_(_ 0)
	ome Address				
Number Street		City / Town / V	illage / Municipality Prov	ince Postal Code	
Last Name	First Name	( I)			
Relationship to Student:	Employe	er (optional):			
Check all applicable boxes	□ Lives with Student □ Has access	s to Student	-	Has Custody	
Emorgonov/Attendance Conta	ct Priority:  □ First □ Second □ Thi	ird	<ul> <li>Has Access to Records</li> <li>Receives Email</li> </ul>	<ul> <li>Receives Mail</li> <li>Speaks English</li> </ul>	
Lineigency/Attendance conta		iru			
Home Number:		Business N	Number:	Priority:	_ (1-3)
Cell Number:		Email Add	ress:		
Address: 🗆 Same as Student's H	ome Address				
Number Street		City / Town / V	illage / Municipality Prov	ince Postal Code	
	(over 18) ACKNOWLEDGEMEN				
ertify that the information that I l plicable, will be included in the O	nave provided on this form is accur ntario Student Record (OSR)	ate. I unders	stand that copies of custody	documentation, if	
oncode, will be included in the O					
cont/Cuardian/Student/auer 10)	Eull Namo Cignoturo			Date	
rent/Guardian/Student (over 18)	Full Name Signature			Date	

				For	School Use	e 0	DNLY				
			SCHOO	L CHECKL	IST FOR STU	DEN	NT RE	GISTRATIO	N		
Legal Las	st Name						١	WRDSB Student #			
Legal Fir	st Name						(	DEN #			
Entry Da	ite		Entr	у Туре			(	Grade			Class/Homeform
			In all instan	ces, ORIGI	NAL documen	tati	ion mu	ust be preser	nted.		
Proof of	Age and	I Immigratio	n Status and	Languag	e Informatio	n fo	or Fur	nding Purpo	ses		
	•	•	Registration Ca					ntry of Birth			
		enship Card/	-								 Canada)
	dian Pass	•						nt speaks En	•	-	
		nanent Resid	ent Card					•	-		dent learned at home
		of Permanent						s 🗆 No	0 0		
		otice of Live B									
	-		ternational Ac	dmissions (	Office						
Complet	te this se	ection if the	student is a I	Permaner	nt Resident:						
-		of Permanent			Date became	a F	P.R.:				
🗆 Perm	anent Re	sident Card (	see back of ca	rd)	Date became						
-			student is a (								
			ent enters Canad	da to live, n							
	dian Pass	•									
🗆 Cana	dian Citiz	enship Certif	cate		Date of Entry	Sta	amp ir	n Passport:			
We canno Gove Utilit	<i>t accept D</i> rnment I y Bill	<i>Driver's License</i> ssued Forms	<b>in Waterloo</b> as Proof of Add	-		Та	ax bill	e/Lease Agro			
Bank	Stateme	nt				Pr	ropert	y Insurance I	Bill		
Proof of	Custody	y (where apj	olicable)								
	g with cus odial Cou	stodial parent rt Order	t(s)				Gua	irdianship Ag	reemen	nt	
Additior	nal Docu	mentation									
	rt Card		Transcript	and/or Cro	edit Summary	Rej	port (s	secondary st	udents)		
•	f applicat ipal to Pr	ole) incipal Transf	Other Prog er Form	gram Docu	mentation						
I certify th indicated.		ormation conta	ined on this for	m is accura	te and that I ha	ve	examir	ned and verifie	ed the ap	plicab	le information as
Certified	by:										
P	Print nam	e			Signature						
	Position	infor			Date			torio Ctarla	+ D	-1	
This form	h and the	information of	contained with	nn it will b	e maintained i	n t	ne On	tario Studen	t Kecord	<b>a</b> .	
Retentior	n: E, plus	5 – file in OSI	2								