



# North East School Division Registration Form

## STUDENT INFORMATION

- Is your student a new Immigration/International student to Canada?  
 Does this student reside outside the NESD school boundaries or outside this school catchment area?

Today's Date		Previous School and City	
Anticipated Start Date			
Legal Last Name		Preferred Surname	
Legal First Name		Preferred First	
Legal Middle Name		Preferred Middle	
Birthdate (Month/Day/Year)		Grade	
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other/Unspecified		Student Cell
Physical Address: Street Address or Land Location including City, Prov, Postal Code			
Mailing Address: PO Box # or RR# including City, Prov, Postal Code			
Citizenship Country		Citizenship Country 2	
Country of Birth		Country of Origin	
Home Language		Home Language 2	
Aboriginal Ancestry	<input type="checkbox"/> Status <input type="checkbox"/> Non-Status <input type="checkbox"/> Metis <input type="checkbox"/> Inuit/Inuk <input type="checkbox"/> N/A		
Status - Band Affiliation			
Status - Live on Reserve?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Reserve and Band of Residence	
Legal custody, guardianship, access, protections for this student?	<input type="checkbox"/> N/A <input type="checkbox"/> Yes - explain		
Medical, Family, Legal and/or Learning Alerts the school needs to know			

Please provide information of all parents/guardians, whether living with student or not living with student, and any other adults with living arrangements

## CONTACT INFORMATION #1

Relationship	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Stepmother <input type="checkbox"/> Stepfather <input type="checkbox"/> Guardian <input type="checkbox"/> Grandparent <input type="checkbox"/> Foster Parent <input type="checkbox"/> Sibling <input type="checkbox"/> Relative <input type="checkbox"/> Sitter <input type="checkbox"/> Agency <input type="checkbox"/> Sports Billet <input type="checkbox"/> Other, explain		
Last Name		Legal Access/Custody, Guardianship, Protection	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
First Name		Lives with Student	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Part-time
Cell Phone		Receive Mailings	<input type="checkbox"/> Yes <input type="checkbox"/> No
Alternate Phone		Receive Emails	<input type="checkbox"/> Yes <input type="checkbox"/> No
Work Phone		Receive Family Portal	<input type="checkbox"/> Yes <input type="checkbox"/> No
Personal Email <small>Attendance, Communications, report cards</small>		Considered Emergency Contact	<input type="checkbox"/> Yes <input type="checkbox"/> No
Physical Address: Street Address or Land Location including City, Prov, Postal Code			
Mailing Address: PO Box # or RR# including City, Prov, Postal Code			



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CONTACT INFORMATION #2			
<b>Relationship</b>	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Stepmother <input type="checkbox"/> Stepfather <input type="checkbox"/> Guardian <input type="checkbox"/> Grandparent <input type="checkbox"/> Foster Parent <input type="checkbox"/> Sibling <input type="checkbox"/> Relative <input type="checkbox"/> Sitter <input type="checkbox"/> Agency <input type="checkbox"/> Sports Billet <input type="checkbox"/> Other, explain		
<b>Last Name</b>		<b>Legal Access/Custody, Guardianship, Protection</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<b>First Name</b>			
<b>Cell Phone</b>		<b>Lives with Student</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Part-time
<b>Alternate Phone</b>		<b>Receive Mailings</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Work Phone</b>		<b>Receive Emails</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Personal Email</b> Attendance, Communications, report cards		<b>Receive Family Portal</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<b>Considered Emergency Contact</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Physical Address: Street Address or Land Location including City, Prov, Postal Code</b>			
<b>Mailing Address: PO Box # or RR# including City, Prov, Postal Code</b>			
CONTACT INFORMATION #3			
<b>Relationship</b>	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Stepmother <input type="checkbox"/> Stepfather <input type="checkbox"/> Guardian <input type="checkbox"/> Grandparent <input type="checkbox"/> Foster Parent <input type="checkbox"/> Sibling <input type="checkbox"/> Relative <input type="checkbox"/> Sitter <input type="checkbox"/> Agency <input type="checkbox"/> Sports Billet <input type="checkbox"/> Other, explain		
<b>Last Name</b>		<b>Legal Access/Custody, Guardianship, Protection</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<b>First Name</b>			
<b>Cell Phone</b>		<b>Lives with Student</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Part-time
<b>Alternate Phone</b>		<b>Receive Mailings</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Work Phone</b>		<b>Receive Emails</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Personal Email</b> Attendance, Communications, report cards		<b>Receive Family Portal</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<b>Considered Emergency Contact</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Physical Address: Street Address or Land Location including City, Prov, Postal Code</b>			
<b>Mailing Address: PO Box # or RR# including City, Prov, Postal Code</b>			
CONTACT INFORMATION #4			
<b>Relationship</b>	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Stepmother <input type="checkbox"/> Stepfather <input type="checkbox"/> Guardian <input type="checkbox"/> Grandparent <input type="checkbox"/> Foster Parent <input type="checkbox"/> Sibling <input type="checkbox"/> Relative <input type="checkbox"/> Sitter <input type="checkbox"/> Agency <input type="checkbox"/> Sports Billet <input type="checkbox"/> Other, explain		
<b>Last Name</b>		<b>Legal Access/Custody, Guardianship, Protection</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<b>First Name</b>			
<b>Cell Phone</b>		<b>Lives with Student</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Part-time
<b>Alternate Phone</b>		<b>Receive Mailings</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Work Phone</b>		<b>Receive Emails</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Personal Email</b> Attendance, Communications, report cards		<b>Receive Family Portal</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<b>Considered Emergency Contact</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Physical Address: Street Address or Land Location including City, Prov, Postal Code</b>			
<b>Mailing Address: PO Box # or RR# including City, Prov, Postal Code</b>			



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## CONTACT INFORMATION #5

<b>Relationship</b>	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Stepmother <input type="checkbox"/> Stepfather <input type="checkbox"/> Guardian <input type="checkbox"/> Grandparent <input type="checkbox"/> Foster Parent <input type="checkbox"/> Sibling <input type="checkbox"/> Relative <input type="checkbox"/> Sitter <input type="checkbox"/> Agency <input type="checkbox"/> Sports Billet <input type="checkbox"/> Other, explain		
<b>Last Name</b>		<b>Legal Access/Custody, Guardianship, Protection</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<b>First Name</b>			
<b>Cell Phone</b>		<b>Lives with Student</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Part-time
<b>Alternate Phone</b>		<b>Receive Mailings</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Work Phone</b>		<b>Receive Emails</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Personal Email</b> <small>Attendance, Communications, report cards</small>		<b>Receive Family Portal</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<b>Considered Emergency Contact</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Physical Address: Street Address or Land Location including City, Prov, Postal Code</b>			
<b>Mailing Address: PO Box # or RR# including City, Prov, Postal Code</b>			

## CONTACT INFORMATION - Rural Student In-Town Billet

<b>Billet Name</b>		<b>Cell Phone</b>	
<b>Relationship</b>		<b>Alternate Phone</b>	

## CONTACT INFORMATION – Emergency Contact, near community of school

<b>Name</b>		<b>Cell Phone</b>	
<b>Relationship</b>		<b>Alternate Phone</b>	

## ADDITIONAL INFORMATION

<b>Sibling Names</b>	
<b>Sibling Relationship</b>	
<b>Sibling Birthdate</b>	
<b>Sibling Age</b>	
<b>Sibling Grade</b>	

## SCHOOL BUS SAFETY

The **DRIVER** is responsible for: Being a professional driver. Ensuring the bus is mechanically ready for the journey. Safely operating the bus by following legislation, regulations, and NESD policy. Allowing enough time to arrive at the destination safely. Familiarizing passengers with emergency equipment and procedures. Establishing additional rules that will enhance bus safety

The **PASSENGER** is responsible for:

Before and while boarding – Arriving at the bus stop 5 minutes early. Wearing weather appropriate clothing. Always standing away from the road and once the bus stops, using the handrail to board. Respecting others – no pushing, fighting or horseplay. Entering the bus and quickly sitting properly in your seat

During the bus ride – Knowing what to do in an emergency. Never placing hands, head, or other body parts out the window. Obeying the safety rules. When bringing large items on the bus, leaving them where the driver indicates. Always remaining seated while the bus is moving. Not cluttering the aisles with bags, feet, etc. Doing your part to not distract the driver.

Leaving the bus – Letting the bus stop completely before standing up. Informing the driver if you drop something inside, under or close to the bus. Verifying with the driver that it is safe to cross the street. Exiting the bus using the handrail and moving at least 2 meters away from the bus.

I have read, understood, and agree to the above School Bus Safety within the North East School Division

## BUS TRANSPORTATION

Transportation is provided for students residing within the attendance area of a school and who live more than one (1) kilometer from that school. Based on this information, will this student require bussing?    No    Yes



# North East School Division Registration Form

## Technology Acceptable Use Agreement

The computers and networks, including Bring Your Own Device, at NESD are to be used for educational purposes. Students may use computers under the permission, direction, and supervision of a staff member. Computer and/or Internet privileges may be temporarily or permanently withdrawn for any violation of NESD's policies and rules. [AP 525.2 Student Agreement - Employee and Student Use of Technology.pdf](#) outlines the agreement.

For new students in grades PreK-8, parents will receive an email from [responses@nesd.ca](mailto:responses@nesd.ca) and be required to accept the technology user agreement on behalf of their student. It is a one-time parent action for this age group.

Students in grades 9-12 will accept the Responsible Use Policy themselves through their school emails. These students will be required to accept the Responsibility Use Policy annually.

I have read and understood the Technology Acceptable Use Agreement

## PRIVACY CONSENT

### Completion of Privacy Consent is an annual requirement in the NESD

It is important to the North East School Division (NESD) to know your preferences for sharing private information while you or your child participate(s) in any of our programs and events. We would like to share the many positive things taking place in your child's school with our community. It is a practice within the NESD to promote and celebrate the successes and achievements of our students and school communities. Under LAFOIP Legislation, personal information about a student cannot be released without the prior written consent of the parent or guardian.

### North East School Division Media

I hereby agree and give permission to the NESD to record, film, photograph, audiotape or videotape my child's image, name, work, and/or performance, and to display, publish, and distribute for promotional and educational purposes on the classroom/school websites, Edsby, affiliated social media sites, newsletters, resources, and promotional materials, and/or broadcast on television or radio for NESD purposes.

#### Parents or Students over 18 years of age

Yes - I have read the above conditions and give permission for NESD's media coverage.

No - I have read the above conditions and do not give permission for NESD's media coverage.

However, I WILL approve my work/my child's work to be displayed within the school – classrooms, hallways, bulletin boards, other in-school displays

### External Organizations and Media

I acknowledge that external organizations and media occasionally attend NESD's programs and events to interview, photograph, and/or video individuals or groups. I give permission for my/my student's image, name, work, and/or performance to be published or broadcast by external organizations and media during the Division's events/programs.

#### Parents or Students over 18 years of age

Yes - I have read the above conditions and give permission for my student/my name and/or image to be used by external organizations and media as listed in the conditions above.

No - I do not give permission for my student/my name and/or image to be used by external organizations and media as listed in the conditions above.

### Unauthorized Media

I understand that media and information may appear in electronic form on the Internet in a manner that is outside the North East School Division's control including, but not limited to, personal accounts for Instagram, Facebook, Snapchat, and other similar Internet media sites.

I have read and understood the Unauthorized Media

## REGISTRATION AUTHORIZATION

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.

X

\_\_\_\_\_  
**Print your Name**

\_\_\_\_\_  
**Parent/Guardian Signature or Student over 18 years of age**

Completed forms must be held for the review of the Superintendent of School Services. The personal information on this form is collected under the authority of LAFOIP and the Education Act and will only be used for the purpose of tracking media consent. *If situations arise that cause you, or your child, to be concerned about safety, with respect to the potential use(s) of his or her personal information as outlined above, please contact the school principal immediately to make changes to your permissions.*