

# SCHOOL DISTRICT #36 (SURREY) STUDENT REGISTRATION FORM

SCHOOL: \_\_\_\_\_SCHOOL YEAR: \_\_\_\_\_

Date: <b>OFFICE U</b>	SE ONLY Enrollment Date:
Grade: YOG: Pupil #: PEN:	Designation? International? ☐ Funded ☐ Non Funde
Counsellor Appt? ELL Testing Required? Ab	original? (if yes, info package provided?) ☐TCO/CCC
Registration Documentation:   Student Proof of Birthdate:	☐Student Proof of Citizenship:
□Parent Photo ID □Parent Proof of Citizenship: □I	Proof of Guardianship: Staff Initial
□Proof of Residence: □ □Proof of Address: □	☐Out of Catchment?: ☐Yes ☐No
Additional Documentation: □Previous Report Card □Withdrawal F	orm
Forms: ☐ Medical Alert Form ☐ Internet Access Form ☐ Media Release	Form $\Box$ Volunteer Driver Form $\Box$ Records Request $\Box$ Course Selection
PLEASE PRII	NT CLEARLY
STUDENT INFORMATION	
Gender:	Birth Date: Age:
Legal Last Name:	
Legal First Name:	
Student Cell Phone: Student Ema	
PROPERTY ADDRESS	
Unit #: Street # and Name:	
City: Province:	
Mailing Address – Same as Property Address? □Yes □No:	
CITIZENSHIP	
	City: Prov:
Country of Birth:Citizen of:	Citizenship Status:
Country of Birth:	Citizenship Status: B.C. Entry Date:
Country of Birth:Citizen of:	Citizenship Status: B.C. Entry Date:
Country of Birth:	Citizenship Status: B.C. Entry Date:
Country of Birth:  Citizen of:  If applicable, Visa Status:  Home Language:  Language Most Used:	Citizenship Status: B.C. Entry Date: B.C. Entry Date: First Language:
Country of Birth:  Citizen of:  If applicable, Visa Status:  Home Language:  Language Most Used:  ABORIGINAL ANCESTRY  YES NO (Info package provided if yes)   I understand that Aborigina  If YES:   Inuit   Metis   First Nations   If First Nations:   Investigation   Inve	Citizenship Status: B.C. Entry Date: B.C. Entry Date: First Language: First Language:
Country of Birth:  Citizen of:  If applicable, Visa Status:  Home Language:  ABORIGINAL ANCESTRY   UYES UNO (Info package provided if yes) Understand that Aborigina	Citizenship Status: B.C. Entry Date: B.C. Entry Date: First Language: First Language:
Country of Birth:  Citizen of:  If applicable, Visa Status:  Home Language:  Language Most Used:  ABORIGINAL ANCESTRY  YES NO (Info package provided if yes)   I understand that Aborigina  If YES:   Inuit   Metis   First Nations   If First Nations:   Investigation   Inve	Citizenship Status: B.C. Entry Date: B.C. Entry Date: First Language: First Language: First Language:
Country of Birth:  Citizen of:  If applicable, Visa Status:  Home Language:  Language Most Used:  ABORIGINAL ANCESTRY  YES NO (Info package provided if yes)   I understand that Aborigina  If YES:   Inuit   Metis   First Nations   If First Nations:   Normalis   If years   If	Citizenship Status:
Country of Birth:  Citizen of:  If applicable, Visa Status:  Home Language:  ABORIGINAL ANCESTRY  YES NO (Info package provided if yes) I understand that Aborigina  If YES: Inuit Metis First Nations If First Nations:  If known, what is your Band of Origin:  PREVIOUS SCHOOL/DISTRICT (Including Stron	Citizenship Status:
Country of Birth:  Citizen of:  If applicable, Visa Status:  Home Language:  ABORIGINAL ANCESTRY  YES NO (Info package provided if yes) I understand that Aborigina  If YES: Inuit Metis First Nations If First Nations:  If known, what is your Band of Origin:  PREVIOUS SCHOOL/DISTRICT (Including Stron)  District:  School Name  Province/Country:	Citizenship Status:
Country of Birth:  Citizen of:  If applicable, Visa Status:  Home Language:  Language Most Used:  ABORIGINAL ANCESTRY  YES NO (Info package provided if yes) I understand that Aborigina  If YES: Inuit Metis First Nations If First Nations:  If known, what is your Band of Origin:  PREVIOUS SCHOOL/DISTRICT (Including Stron)  District:  School Name	Citizenship Status:
Country of Birth:  Citizen of:  If applicable, Visa Status:  Home Language:  ABORIGINAL ANCESTRY  YES NO (Info package provided if yes) I understand that Aborigina  If YES: Inuit Metis First Nations If First Nations:  If known, what is your Band of Origin:  PREVIOUS SCHOOL/DISTRICT (Including Stron  District:  Province/Country:  MEDICAL INFORMATION  CareCard #:  Allergies/Health Conditions:	Citizenship Status:  ate:  B.C. Entry Date:  First Language:  Ancestry entitles my child to receive enhanced service (see info package)  on-Status
Country of Birth:  Citizen of:  If applicable, Visa Status:  Home Language:  Language Most Used:  ABORIGINAL ANCESTRY  YES NO (Info package provided if yes) I understand that Aborigina  If YES: Inuit Metis First Nations If First Nations:  If known, what is your Band of Origin:  If y  PREVIOUS SCHOOL/DISTRICT (Including Stron  District:  School Name  Province/Country:  MEDICAL INFORMATION  CareCard #:  Allergies/Health Conditions:  Life Threatening?:	Citizenship Status:
Country of Birth:  Citizen of:  If applicable, Visa Status:  Home Language:  ABORIGINAL ANCESTRY  YES NO (Info package provided if yes) I understand that Aborigina  If YES: Inuit Metis First Nations If First Nations:  If known, what is your Band of Origin:  PREVIOUS SCHOOL/DISTRICT (Including Stron  District:  Province/Country:  MEDICAL INFORMATION  CareCard #:  Allergies/Health Conditions:	Citizenship Status:
Country of Birth:  Citizen of:  If applicable, Visa Status:  Home Language:  Language Most Used:  ABORIGINAL ANCESTRY  YES NO (Info package provided if yes) I understand that Aborigina  If YES: Inuit Metis First Nations If First Nations:  If known, what is your Band of Origin:  If y  PREVIOUS SCHOOL/DISTRICT (Including Stron  District:  School Name  Province/Country:  MEDICAL INFORMATION  CareCard #:  Allergies/Health Conditions:  Life Threatening?:	Citizenship Status:
Country of Birth:  Citizen of:  If applicable, Visa Status:  Home Language:  Language Most Used:  ABORIGINAL ANCESTRY  YES NO (Info package provided if yes) I understand that Aborigina  If YES: Inuit Metis First Nations If First Nations:  If known, what is your Band of Origin:  PREVIOUS SCHOOL/DISTRICT (Including Stron)  District:  School Name  Province/Country:  MEDICAL INFORMATION  CareCard #:  Allergies/Health Conditions:  Life Threatening?:  Additional Health Information:	Citizenship Status:
Country of Birth:  Citizen of:  If applicable, Visa Status:  Home Language:  Language Most Used:  ABORIGINAL ANCESTRY  YES NO (Info package provided if yes) I understand that Aborigina  If YES: Inuit Metis First Nations If First Nations:  If known, what is your Band of Origin:  If y  PREVIOUS SCHOOL/DISTRICT (Including Stron)  District:  School Name  Province/Country:  MEDICAL INFORMATION  CareCard #:  Allergies/Health Conditions:  Life Threatening?:  Additional Health Information:	Citizenship Status:

<u>CUSTODY INFORMATION</u>				
<b>Custody:</b> Both Parents □Yes □No If no, pl	ease indicate custod	ly:		
Custody Order?: $\square$ Yes $\square$ No (If Yes, copy is	required) <b>Student</b>	Living With:		
PARENT/GUARDIAN CONTACT	(8)			
	· /	Contact #2 Polat	ionship:	
Contact #1 Relationship:				
First Name: Last Name:				
Home Phone: Cell:		Home Phone:	Cell:	
Work phone:		Work phone:		
Email:				
Living with student: □Yes □No Has Custody: □Yes □No		<b>Living with student</b> : □Yes □No <b>Has Custody</b> : □Yes □No		
Can pick up?: □Yes □No		Can pick up?: □Yes □No		
Speaks English: □Yes □No If no, languag	ge:	Speaks English: 🗆 Y	/es □No If no, language:	
Address if different:		Address if differen	t:	
EMERGENCY CONTACT(S) (Other				
Contact #3 Relationship:			ionship:	
First Name:		First Name:		
Last Name:		Last Name:		
Home Phone: Cell:			Cell:	
Work phone:		Work phone: Can pick up?: □Yes □No		
Can pick up?: □Yes □No				
Speaks English: □Yes □No If no, languag			Yes □No If no, language:	
Contact #5 Relationship:		Contact #6 Relationship: First Name:		
First Name:				
Last Name: Cell:		Last Name: Cell:		
Work phone:		Work phone	Cell.	
Can pick up?:   Yes  No		Work phone: Can pick up?: □Yes □No		
Speaks English: □Yes □No If no, languag	7 <b>0</b> .	Speaks English: □Yes □No If no, language:		
Speaks English. 11 103 11 110, languag	se	Speaks Eligibil.	ires into inito, language.	
SIBLING(S)				
Sibling #1 Relationship:	Sibling #2 Relatio	nship:	Sibling #3 Relationship:	
Name:	Name:		Name:	
Date of Birth:	Date of Birth:		Date of Birth:	
Gender: Age: Grade:		ge: Grade:	Gender: Age: Grade:	
School:	School:		School:	
NOTES				
VERIFICATION - PARENT/GUAI	RDIAN			
I certify that the information on this form is	correct.			
Challes Name				
Student Name			Date	
Parent/Guardian Signature			Date:	

The information on this form is collected under the authority of the School Act. Information is used by the District for Ministry of Education reporting; demographic, enrolment, budget facility and operational analyses. It will be kept secure and confidential in accordance with the Freedom of Information and Protection of Privacy Act.



## Media / website consent form

#### **News Media**

Over the course of a school year, the Surrey School District sometimes receives requests from the news media to interview, photograph or videotape individual or groups of students in connection with stories the media are working on. Also, the news media is sometimes invited to school functions to publicize events.

As a public body, we attempt to cooperate with the media whenev privacy is our priority. Therefore, we ask that this consent form to respect your wish for family privacy.	
Yes, as the parent or guardian of the student name publication/broadcast of his/her picture and/or name	
No, as the parent or guardian of the student named publication or broadcast of his/her picture and/or reschool or school district has control over such activities.	name by the news media, when and where the
(School staff cannot control news media access or photos/videos events open to the public, such as sports tournaments, student p	
School / District Web	osites
In accordance with the <i>Freedom of Information and Protection of</i> requires consent to use a students' full name or photograph/video general public. Therefore, your permission is requested to post your child in connection with positive, day-to-day school activities	on school or district websites accessible to the our child's full name, photograph or video of
Yes, as the parent or guardian of the student name of his/her name and/or photo or video on the school	, , ,
No, as the parent or guardian of the student named publication of his/her name, photo or video on sch	, , ,
(Consent for secondary school students is valid until graduation. annually. However, you may resubmit a new consent form to your	•
Parent / Guardian Signature	Date
Secondary Student Signature	Date
Student's Name (print):	Div:Grade:



#### Woodland Park Elementary 9025 158 Street

Surrey, BC V4N 2Y6
Phone: 604 589 5957 Fax: 604 589 5397

www.surreyschools.ca/schools/woodlandpark

## **Technology Use Permission**

Dear Parent/Guardian,

An important part of our class work this year will involve using Internet-based tools to create and share our learning – to continue building a lifelong digital portfolio. Many tools may require your child to create a personal account, using his/her School District provisioned email account (<a href="mailto:doe.j@surreyschools.ca">doe.j@surreyschools.ca</a>). Please note that your child will use Internet-based tools for both classroom activities and homework assignments, and will continue to hold accounts after our coursework is completed.

Your written consent to your child's use of Internet-based tools is required by British Columbia's Freedom of Information and Protection of Privacy Act (FIPPA).

If you choose not to provide your consent to your child's use of Internet-based tools, your child will not be penalized in any way and alternate activities will be provided, as appropriate.

It is important to be aware that the majority of the Internet-based tools noted below are online services hosted outside of British Columbia and possibly Canada. While stored outside the country, information in your child's accounts may be subject to the laws of foreign jurisdictions, including, in the United States, the USA Patriot Act.

As a general safe practice, when interacting with any online service, students should take care and avoid posting personal information or personal location that could be used to identify themselves or other persons.

To explain and document their learning, students may be using Surreyschools.ca, Prezi, Showme, Kidsblog, Edublog, Voicethread, Wordpress, Google Tools for Education, Flickr or similar programs.

To communicate with other learners, students may be using Surreyschools.ca, Twitter, Wordpress, Kidsblog, Blogger, Google Tools for Education, Skype, Wikispaces, or similar programs.

To store and manage assignments and other information, students may be using Surreyschools.ca, Dropbox, Youtube, Evernote, Google Drive or similar programs.

Kindly return this letter signed and dated.

Consent: I understand that the information my child may create and store could be stored in or accessed from a location outside of Canada, and I hereby consent, on behalf of me and my child, to my child's information identified above being stored in, or accessed from, a location outside of Canada.

This permission to use the tools indicated above is granted for the duration of my child's time in the Surrey School District.

Student Name	 Teacher	 Division	 Grade
Parent's Signature	Parent Name		
Date			



### **Woodland Park Elementary**

9025 158 Street Surrey, BC V4N 2Y6 604-589-5957

## **BC School Fruit and Vegetable Nutritional Program**

We are pleased to announce our school has once again been accepted into the BC School Fruit and Vegetable Nutritional Program sponsored by BC Agriculture in the Classroom Foundation and ActNowBC.

Our school is involved in province-wide healthy living initiative. One of the goals is to encourage healthy eating by providing fresh BC Fruits and Vegetables to the students during classroom time. The students will receive picked, washed and ready to enjoy produce for 13 weeks at no charge!

To ensure every student's health and safety of	during this program, pl	lease return this consent	t form.
I do not want my child to participate in	n the BC School Fruit a	nd Vegetable Program.	
I want my child to participate in the BC	C School Fruit and Vege	etable Program.	
MEDICAL ALERT  My child has specific food allergies			
<u>Hc</u>	ome for Lunch		
I give my permission for my child to lea	ave the Woodland Par	k Elementary school gro	unds to come
I have discussed with my son/daughter straight back to school. I accept resposchool property.	•	_	
I do not give my permission.			
Student Name	Teacher	Division	Grade
Parent's Signature	Parent Name		
Date			



#### **DIGITAL PORTFOLIOS CONSENT FORM**



ترجمه (Arabic) (Chinese) 已翻译

Dear Parents/Guardians

Teachers in the Surrey School District have the option to communicate student learning through personalized digital portfolios using an online tool called *FreshGrade*. *FreshGrade* represents a new way to communicate student learning which engages our families in ways that better aligns with emerging self-service trends that provide real-time student progress, reporting, parent participation and student support for our families today. We believe that *FreshGrade* allows for more effective communication with our parents. Learning evidence may take the form of informal notes, pictures, links to video or audio, student self-assessments, which documents your child's progress in relation to the learning standards in the prescribed areas of learning.

During this school year, students will be active participants and take ownership of their learning by capturing their own evidence of learning by choosing artifacts in collaboration with teachers. Student self-assessment and reflections on their learning will be a significant part of their portfolios. Most important is that parents receive information in a timely manner so you can celebrate your child's learning, stretch their thinking by asking good questions, provide support and communicate with your child's teacher when it is most needed.



NEW THIS YEAR is the integration of "Google Translate", a third-party service that will allow parents to translate wording in your child's digital portfolio to a language they may be more familiar with. The service will also allow teachers to translate messages from parents that may be in a different language. While the service does not claim to perfectly translate one language to another, we believe "Google Translate" can offer parents greater access to, and a deeper understanding of, the contents of their child's digital portfolio.

Before you access the "Google Translate" service, you need to know that unlike all other information sent to *FreshGrade* that travels within and is stored in Canada, there is a possibility that comments about learning samples sent to be translated through the "Google Translate" service may leave Canada. While in transit outside the country, information in the translation may be subject to the laws of foreign jurisdictions, including, in the United States, access under the USA Patriot Act. Please sign the reverse side of this form to confirm that you have read and you understand the potential risk in using "Google Translate".

As a general safe practice, when interacting with any online service, students should take care and avoid posting personal information or personal location that could be used to identify themselves or other persons.

In order for teachers to document student learning electronically, your consent is required. All data within FreshGrade resides on servers located in Toronto, Ontario and is encrypted while stored and in transit. Accounts are password protected and only you, your child, your child's teacher(s), and anyone else you grant access to can view the portfolio. Since learning is a social activity and images/videos may display your child learning with others, consideration should be taken to not post or share on social media any content within your child's FreshGrade portfolio that may contain the name and/or likeness of other students in the class. With your consent, you will receive an email with information on how you can access your child's individual digital portfolio.

As a public institution, we are subject to the *BC Freedom of Information and Protection of Privacy Act*. In accordance with this Act, we must at all times protect the privacy of students under our care. The *FreshGrade* services collects registration and account information from teachers, parents and students which includes your name, user name, email address, phone number, profile picture, affiliation school and its location. *FreshGrade* also collects personal information when the student downloads the mobile application, sends an invitation and requests for others to collaborate on classroom activities. *FreshGrade* will only offer their services to those who are confirmed as enrolled students in the Surrey School District. Participating students will have signed parent consent forms acknowledging that their personal information will be disclosed, and securely stored and accessed in Canada.

If you choose to participate in the use of *FreshGrade*, please complete and return this form with your child. Thank you for your support and we look forward to a wonderful year of learning.

Sincerely,

Antonio Vendramin,
District Principal, Communicating Student Learning
vendramin\_a@surreyschools.ca



#### CONSENT:

I have read the attached letter from the Surrey School District and understand that when implementing the web-based service known as *FreshGrade* we will combine information about students that is collected by the School District as part of its registration processes, with class work and other content that the teacher and student add or upload to this service. I understand that the objective of *FreshGrade* is to provide a web-based/mobile tool that will enable more effective communication and collaboration between students, educators and parents about student's evidence of learning and assessment at school.

By signing this consent, I, on behalf of my child, understand and agree that:

- The School District may provide personal information about my child as described in the attached letter;
- All personal information disclosed to *FreshGrade* will be encrypted and stored on external servers located in Canada and managed by service providers engaged by the School District;
- Student personal information and evidence of learning in *FreshGrade* will be accessible to you, your child, and your child's teachers and school based administrator(s);
- The use of FreshGrade is governed by Surrey School District policy 5780.1 and 5780.2;
- Since learning is a social activity and images/videos may display your child learning with others, the name and/or likeness of other students in the class should not be posted or shared on social media sites; and
- Information sent through the "Google Translate" service may be subject to the laws of foreign jurisdictions, including, in the United States, access under the USA Patriot Act.

This consent will be considered valid from the date at which it is signed until one year after the point at which your child named below is no longer a student within the School District. If at any point you choose to withdraw consent, please contact your school directly.

I also hereby acknowledge that I have read and understood the School District's Policy which governs the Use of *FreshGrade*. **This form must be returned**, signed and dated, to the student's school so that a *FreshGrade* account can be activated for the student named below.

Signature of Parent or Guardian	Signature of Student (if over 13)
Print Name	Print Student Name and Grade
Print School Name	Print Teacher's Name
Parent e-mail address	Print School Name
 Date Signed	 Date Signed