

REGISTRATION PACKAGE FOR NEW STUDENTS

Students who will be attending Strathmore High School in the fall of 2011, who are **NOT** presently attending Crowther Memorial Junior High School, are asked to complete the following:

- a) Registration Forms (2 sided)
- b) FOIP
- c) Internet Contract
- d) Request for cum file transfer
- e) Supply a photocopy of student's Birth Certificate
- f) Supply a copy of the student's most recent report card
- g) You may be asked to provide proof of guardianship and residency in the area
- h) Complete the course selection form

We ask that the above information be completed and returned to Student Services at SHS by the week of April 21st .

Starting May 2nd we ask that you call the school reception at (403-934-3135) to book an appointment with a counsellor to review the completed timetable. Appointments will be held June 3rd - 10th for all students who will begin grade 10 in Fall 2010. Grade 11 and 12 students will book appointments for June 13th – 28th. As well, Counsellors will be available for all course changes throughout exam week

Student Lives With:

Mother Father Guardian Other please specify if other: _____
 (Please check all that apply)

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? Yes No

If "yes", please discuss this situation with the school administration. Legal documentation will be required.

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.

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:	Relationship to Student:	
Address:	City:	Postal Code:

Your child is a resident student of the Separate Catholic School Division if his/her parent(s) is/are Catholic.
 Is the child's father Catholic? Yes No Is the child's mother Catholic? Yes No

Child resides with: Mother _____ Father _____ Both _____

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

- whose first language learned 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 French in Canada,
- have the right to have all their children receive primary and 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?

Yes No

B. If yes, do you wish to exercise your right to have your child receive a Francophone education?

Yes No

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

Legal Document used to verify registration: (Circle One)

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

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** _____

If you have any questions regarding this request for individual student information and about our use or disclosure of student information, please contact the FOIP Coordinator of the Golden Hills School Division #75 at 435A Highway #1, Strathmore, Alberta T1P 1J4, Telephone: 403-934-5121 or 1-800-320-3739 Fax: 403-934-5125



Golden Hills School Division No. 75

Freedom of Information and Protection of Privacy (FOIP) Act

The information collected on the registration form contains personal information required to properly register your child within Golden Hills School Division No. 75 and is necessary to fulfill the school board's obligation to provide each student with an educational program that meets their needs. Once this information is collected and compiled, Golden Hills School Division No. 75 believes the uses listed below are part of a vital, healthy and functioning school, and participation is important and encouraged. We realize that there may be occasions when you have concerns relating to the safety of your child with respect to the use of this information. In that case, please contact the school principal or the Golden Hills FOIP Coordinator at (403) 934-5121.

Level 1: Consent for Use of Personal Information within School Community:

- Use student's name, address, birth date, school, grade, and photograph for identification purposes in a school or school-related activity.
- Take individual, class, team, group or club photographs for school activities and the display of these photographs for recognition purposes in the school.
- Use student's name, school, grade, and photographs for athletic events, fine arts productions, celebrations and other school sponsored activities as well as on art work, written work or other creative work or material displayed at the school.
- The use of a student's name, telephone number, grade and related contact information by assigned classroom volunteers for absenteeism verification, emergency fan-outs, emergency health situations, field trips and other school sponsored activities.

Level 2: Consent for Use of Personal Information for School Division purposes:

- Display student's name, school, grade, photograph, academic information and/or written material in a school newsletter, yearbook, The Link, Annual Education Plan, Education Results Report or other school board publications which may be posted on the Division's website and distributed to stakeholders.
- Use student's name, school, grade, photograph and academic information for honour rolls, graduation ceremonies, and other recognition awards at the school or school board sites.
- Take photographs or videos of classroom or other school sponsored activities by personnel authorized by the school board for non-profit and educational purposes, at the school or school board sites.

Level 3: Consent to Use Personal Information for Media Releases

- Use student's name, school, grade, photograph for graduation ceremonies, and other recognition awards in newspapers and other media
- Take individual, class, team, group or club photographs for recognition purposes, for display in newspapers and other media.
- Allow newspapers and other media to take photographs or videos of classroom or other school sponsored activities.

This list does not include all the activities or programs that take place in a school. Parents/guardians will be contacted by school personnel for written consent when activities that are inconsistent with those listed above occur.

Photos/videos of school activities (e.g. athletic events, concerts, graduation or other ceremonies) that are open to the general public may be taken and used for purposes within and outside the school. The school may not be able to restrict such activity at public events.

I hereby give consent to the use of personal information as described in levels 1, 2 and 3 above for

_____:

(Student's Name)

Date: _____

Signature: _____

Parent(s)/Guardian(s) or Student (if 16 years of age or older)

If you wish to restrict the use of information please do not sign this form.

Please ensure that the principal is advised of your concerns.

STRATHMORE HIGH SCHOOL

CONTRACT FOR INTERNET USE

I will abide by the following Internet rules:

1. I understand that the Internet connection is to be used only for research.
2. I am aware that my activities on the Internet can and will be traced by school staff.
3. I will not use a home e-mail account to access Internet materials with school computers. I understand that I cannot send files on the Internet unless it is a school activity.
4. I will not give out personal information such as my address, my picture, telephone number, and parent's work address or phone number, or the name and location of my school.
5. I will obey the guidelines that the teacher sets up for going online including time of day, length of time I can be online, and what areas are appropriate for me to visit.
6. I will tell the teacher if I come across information which makes me feel uncomfortable or which might be inappropriate. If I am unsure, I will immediately check with the teacher.

Consequences: The first time I violate these rules, I will forfeit access to the Internet for a month. If necessary, the Principal will take further disciplinary action. If I violate these rules a second time, I will forfeit access to the Internet for a semester.

CONTRACT FOR INTERNET USE AT SHS

SCHOOL YEAR: _____

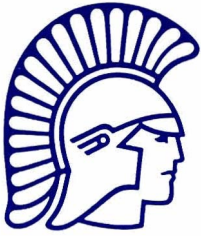
Student Name: _____ (please print) Grade: _____

Teacher Advisor: _____

Student Signature: _____ Date: _____

I have read and agree with the above policy regarding my son's/daughter's use of the Internet

PARENT SIGNATURE: _____ DATE: _____



HOME OF THE SPARTANS

Strathmore High School

100 Brent Boulevard ~ Strathmore, Alberta T1P 1V2 • Tel. (403) 934-3135 • Fax (403) 934-6694

Principal: Gary Reagan

Associate Principal: Kyle Larson

Associate Principal: Doug Raycroft

School: _____

Address: _____

Fax Number: _____

To Whom It May Concern:

Re: _____

The above named student has transferred from your school district. **Please forward cumulative Records, Confidential Files** and any other pertinent information for _____ to Strathmore High School.

In order that we place students in appropriate programs could you please identify if this student has any special needs or is a coded student in your response to this request.

Section 23 of the School Act provides for the transfer of complete cumulative records within Alberta, however, if for any reason you will not be forwarding the cumulative file, please fax any data to 403-934-6694 or call 403-934-3135.

Sincerely,

Karen Harris
Counsellor

Karen Galandy
Counsellor

For G. Reagan
Principal

Cumulative Record Consent Form

This certifies that I hereby grant _____ permission

to release the Cumulative Record and confidential files of _____ to Strathmore High School.

Date

Signature of Parent/Guardian