

All NEW STUDENTS wishing to register are asked to contact our school @ 780-778-2345.

École St. Joseph School
5575 McIlwaine Dr.
Whitecourt, AB
T7S 0G6
Phone: (780) 778-2345
Fax: (780) 778-2008



Living Waters Catholic Regional Division No. 42
Box 1949
Whitecourt, AB
T7S 1P6
Phone: (780) 778-5666 Fax: (780) 778-2727
Website: www.livingwaters.ab.ca

The information requested on this form is being collected pursuant to the Student Record Regulation, A.R. 213/89 (School Act, s. 23) and the FOIP Act, Sections 33 (c) and 34. Information acquired through this form is kept secure and access is restricted.

Office Use Only:

Student ID # _____

Alberta Ed # _____

Receipt No. _____

REGISTRATION FORM 2018-2019

STUDENT INFORMATION

Students **Legal Name** _____ SEX Male
Last First Middle Female
 Unassigned

Students Preferred Name _____
(if different from above) Last First Middle

Birthdate: _____ / _____ / _____ AGE as of Sept 1: _____ ENTERING GRADE: _____
YEAR MONTH DAY

Citizenship Status: (Please provide immigration papers to support immigration status)

- A. Canadian Citizen (1) _____ (Canadian Birth Certificate or Canadian Citizenship Papers)
B. Foreign Born and/or Second Language Students (Immigration Papers Required to Support Immigration Status)

Permanent Resident (2) _____ Expiry Date _____

Temporary Resident (5) – International Student _____

Student Authorization Expiry Date _____

Child of a Canadian Citizen (6) _____

Child of Resident (7) – eg. Work Permit/Refugee Claimant/
Parent Study Permit _____ Expiry Date _____

Arrival Date in Canada _____

Arrival Date in Alberta _____

Country of Birth _____

A COPY OF THE STUDENTS BIRTH CERTIFICATE OR VISA/IMMIGRATION DOCUMENT IS REQUIRED FOR ALL NEW STUDENTS AT ÉCOLE ST. JOSEPH SCHOOL

Home phone: _____ Student Cell Phone: _____

Mailing Address: _____ City: _____ Postal Code: _____

Rural Land Description: _____ Rural Address Sign Number _____

Student lives with: Father & Mother Father Mother Guardian Independent Student

Father/Stepmother Mother/Stepfather Other (Please specify) _____

(Collected to enable schools to direct communications to an appropriate address)

PARENT/GUARDIAN INFORMATION

Parent/Guardian: Name: _____ Mr., Mrs, Ms., Dr., etc _____

Home Phone: _____ Work Phone _____ Cell: _____

Email: _____

Address (if different from student) _____

Does the student reside with this individual? Yes No

Parent/Guardian: Name: _____ Mr., Mrs, Ms., Dr., etc _____

Home Phone: _____ Work Phone _____ Cell: _____

Email: _____

Address (if different from student) _____

Does the student reside with this individual? Yes No

I hereby give permission to release my email address to the school for the purposes of distributing school based information (newsletters, etc) to our household.

*Parent/Guardian Signature

Parent e-mail address

EMERGENCY CONTACT

In case of emergency or school closure, or if no one answers the home telephone number, please provide us with names and phone numbers of contacts if the school cannot contact you. An **emergency contact person** is someone other than the student's parent or guardian.

Emergency Contact: _____ / (____) _____ / (____) _____
Name Day Telephone Other Phone

Emergency Contact: _____ / (____) _____ / (____) _____
Name Day Telephone Other Phone

ABORIGINAL STATUS

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

First Nation (status)	First Nation (non-status)	Metis	Inuit

For further information, please refer to www.education.alberta.ca/systemsupports/results-reporting or contact Alberta Education at 780-427-8501.

If you have questions regarding the collection of student information by the school board, please contact the School Board Superintendent at 780-778-5666.

LAST SCHOOL ATTENDED

Last School Attended: _____ Grade: _____

City/Town: _____ Phone Number: _____

Was the student suspended or expelled from the last school? Yes No

SPECIAL EDUCATION INFORMATION

Individual Planning Needs

Has your child required an Individual Program Plan in the past? Yes No

Please explain any specialized learning needs your child may have {Includes: Learning Disabilities, Giftedness, Emotional / Behavioral Needs, Physical / Medical Needs, Reading / Mathematics Difficulties, etc.}

MEDICAL INFORMATION

Are there any particular medical problems your child may be experiencing which you wish the school to be aware of?

Allergies (please specify) Asthma Diabetes Epilepsy Heart Condition Other (please specify)

Please explain: _____

FAITH

This information is collected for purposes of determining whether your child will be participating in Catholic faith development classes organized by the parish.

Has your child been baptized Catholic? Yes No

Has your child received First Communion? Yes No

Has your child been Confirmed? Yes No

Father - are you Catholic? Yes No

Mother - are you Catholic? Yes No

Please provide a copy of Certificate of Baptism

Please Note:

All of the schools in this district are Catholic Separate Schools, the essential purpose of which is to fully permeate Catholic theology, philosophy, practices and beliefs, the principles of the Gospel and teachings of the Catholic Church, in all aspects of school life, including the curriculum of every subject taught, both in and outside of formal religion classes, celebrations and exercises.

Every course of study and educational program, all institutional materials, instruction and exercises will at all times include subject matter that deals primarily and explicitly with religion.

FRANCOPHONE ELIGIBILITY Section 23

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 as set out in the *Canadian Charter of Rights and Freedoms*, are you eligible to have your child receive a French first language (Francophone) education? (Please place an X in the appropriate box.)

Yes No Do not know

B. If yes, do you wish to exercise your right to have your child receive a French first language (Francophone) education?

Yes No

CUSTODY/STUDENT PROTECTION

In rare instances a child may be designated as "Protected" if a court has issued a restraining order under the Child Welfare Act, the Domestic Relations Act, the Divorce Act, or the Young Offenders Act. Please indicate if the school administration should be aware of any such Court Order for the protection of your child.

Yes No If 'yes', please make arrangements to discuss this situation with the school administration. Legal documentation will be required.

ENGLISH AS A SECOND LANGUAGE INFORMATION

What language is primarily spoken and understood at home? English Other (please specify) _____

If English is not the primary language, will the student require extra help with the English language? Yes No

I hereby declare I have read and understood the information contained on this form and the information I have provided is correct:

Date: _____ **Parent's Signature:** _____

If you have any questions regarding this request for individual student information and about our use or disclosure of student information, please contact **Living Waters Catholic Regional Division No. 42's FOIP Coordinator**. The phone number is (780) 778-5666 and the fax is (780) 778-2727. The email address is jo-anne.lanctot@livingwaters.ab.ca.

Students registered at St. Joseph School are expected to behave in ways consistent with the teachings of Christ. Attendance at religious celebrations is considered to be part in parcel of the spiritual life at St. Joseph School. It is expected that all students behave reverently while in attendance at these celebrations. Registered students at St. Joseph are also expected to attend religion classes except where time tabling conflicts approved by the principal occur.

LIVING WATERS CATHOLIC REGIONAL DIVISION NO. 42

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY PROVISIONS SCHOOL ACTIVITIES CONSENT FORM

The information collected on this form as part of the school process is personal information as referred to in the Freedom of Information and Protection of Privacy (FOIP) Act, which became effective for all Alberta School Jurisdictions on September 1, 1998. This personal information is collected pursuant to the provisions of the School Act and its regulations, and pursuant to Section 32 © of the FOIP Act as the collection is related directly to and is necessary to a school board's obligation to provide students with an education program that meets their needs and to provide a safe and secure school environment. The FOIP Act requires that parents/guardians be advised of the collection and use of personal information that is not authorized under the School Act.

Living Waters Catholic Regional Division No. 42 believes that the activities listed below are part of the normal operation of a school. The following items describe activities where student information may be used. These activities listed below are part of normal operation of a school. These activities are most important to the operation of a school and require your consent. Please read this list of activities carefully and complete the section below.

SCHOOL ACTIVITIES CONSENT LIST

1. Individual photos that are taken;
2. Photos and /or videos of classroom and school activities for display on school website, school Facebook page (no names) and school yearbook;
3. Class and team photos that are taken and used within the school;
4. Student name, photograph, and write-up that are included in school yearbook (if one is produced);
5. Student name and description of activities that are used in the school newsletter and other school communications;
6. Student names that are included in an honor roll listing, birthday recognition listing (including announcement on PA system), student achievement awards, and graduation roll, within the school;
7. Media photographs or videos of classrooms and school activities, where individual students cannot be identified, may be taken and used by the media. (Before an individual student is identified by the media, a media consent form will be completed by the parent/guardian).
8. Student names that are used on artwork, written material, or other items to be displayed in the school;
9. The use of student names, related contact information and phone numbers for classroom reps;
10. The use of student names and academic information necessary for determining eligibility or suitability for provincial, federal or other types of awards, grants, or scholarships, in the event the board applies on a student's behalf;
11. Photographs or videos taken by the media or any other organization where individual students are identified or instances where students are interviewed. (It is the responsibility of the school administration to approve the access of the media to school activities);
NOTE: Photos and/or videos of school activities that are open to the general public may be taken and used for purposes within and outside of the school. The school may not restrict such activity at public events.
12. Photographs or videos taken by the Division where the material will be used outside of the school;
13. Copyright for artwork or creative writing which will be reproduced for use outside of the school;
14. The circulation of information on a "need to know" basis regarding students who have severe or life-threatening medical conditions, and those who require immunization, communicable disease control, speech and dental services. (You may be contacted by the Regional Health Authority for these services);
15. Other similar activities within the school community.

CONSENT:

I have read and understand the uses that will be made of ALL of the personal information as listed and described in the School Activities Consent List and hereby consent to the collection and use of this information:

Signature of Parent/Guardian

Date: _____

OBJECT:

I have read and understand the uses that will be made of the personal information as listed and described in the School Activities Consent List and I hereby consent to the collection and use of this information **EXCEPT** for the following activities:

Number: _____ Specify concern: _____

Number: _____ Specify concern: _____

Signature of Parent/Guardian

Date: _____

LIVING WATERS CATHOLIC REGIONAL DIVISION NO. 42

**FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY PROVISIONS
OF HEALTH SERVICES INFORMATION FORM**

In accordance with section 5 (4) of the Student Record Regulation Living Waters Catholic Regional Division No. 42 will disclose specific student and parent/guardian information to the Regional Medical Officer of Health upon written request. This information will be used for the purposes of contacting parents regarding voluntary health programs. (immunization, dental health, vision and hearing screening) and for communicable disease control purposes.

You may wish to provide other health information to the school and Regional Health Authority for safety and health purposes.

My child has the following medical conditions (check where applicable):

- Y Rheumatic Fever
- Y Epilepsy or Convulsion
- Y Congenital heart conditions
- Y Heart murmur
- Y Allergies (Please specify) _____
- Y Other (Please specify) _____

The information, which will be kept in confidence by the School Division and the Regional Health Authority, is required for the purposes of immunization, communicable disease control and speech and dental services.

Print Name _____

Signature _____

Mailing Address _____

Telephone Number _____

CASL Legislation

Yes No

I give consent for École St. Joseph School to send to my email (or text) information relating to the events and activities at my child's school. I also understand that I can unsubscribe from these messages at any time by contacting the school at (780) 778-2345 or by email to ashley.floyd@livingwaters.ab.ca

ST. JOSEPH SCHOOL EXPECTATIONS

We ask students and parents to please initial in the spaces provided to indicate your awareness and acceptance of these very important expectations.

	<u>Student Initials</u>	<u>Parent Initials</u>
1. Respect and cooperate with all staff.	_____	_____
2. Respect other students. Including: <ul style="list-style-type: none">• Physical contact• Verbal abuse (notes, e-mail, etc.)• Other student property	_____	_____
3. Respect the Catholicity of the school. <ul style="list-style-type: none">• Actively participate in a religion course• Attend all school masses and celebrations	_____	_____
4. Respect the dress code. <ul style="list-style-type: none">• No inappropriate logos or revealing clothing, as outlined in the school calendar	_____	_____
5. Be on time for classes. <ul style="list-style-type: none">• Consequences for lateness include detention and in extreme cases in-school suspensions	_____	_____

Appendix M:

Acceptable Technology use- Student

ACCEPTABLE USE AGREEMENT - STUDENT LIVING WATERS CATHOLIC SCHOOLS

Living Waters Catholic Schools recognizes the value of computer and other electronic resources to improve student learning and enhance the administration and operation of its schools. Living Waters also recognizes the importance of upholding all Catholic moral imperatives, especially with respect to people being treated with dignity and respect. To this end Living Waters Catholic Schools encourages the responsible use of computers; computer networks, including the Internet; and other electronic resources in support of the mission and goals of Living Waters Catholic Schools.

Because the Internet is an unregulated, worldwide vehicle for communication, information available to staff and students is impossible to control. Therefore, Living Waters Catholic Schools adopts this agreement governing the voluntary use of electronic resources and the Internet in order to provide guidance to individuals and groups obtaining access to these resources on Jurisdiction-owned equipment.

Living Waters Catholic Schools Rights and Responsibilities

It is the policy of Living Waters Catholic Schools to maintain an environment that promotes ethical and responsible conduct in all online network activities by staff and students. It shall be a violation of this agreement for any employee, student, or other individual to engage in any activity that does not conform to the established purpose and general rules and policies of the network. Within this general agreement, Living Waters Catholic Schools recognizes its legal and ethical obligation to protect the well-being of students in its charge. To this end, Living Waters Catholic Schools retains the following rights and recognizes the following obligations:

1. To log network use and to monitor fileserver space utilization by users, and assume no responsibility or liability for files deleted due to violation of fileserver space allotments.
2. To remove a user account on the network – including an email account.
3. To monitor the use of online activities. This may include real-time monitoring of network activity and/or maintaining a log of Internet activity for later review.
4. To provide internal and external controls as appropriate and feasible. Such controls shall include the right to determine who will have access to Jurisdiction-owned equipment and, specifically, to exclude those who do not abide by the Living Waters Catholic Schools' acceptable use agreement or other policies governing the use of school facilities, equipment, and materials. Living Waters Catholic Schools reserves the right to restrict online destinations through software or other means.
5. To provide guidelines and make reasonable efforts to train staff and students in acceptable use and policies governing online communications.

Staff Responsibilities

1. Staff members who supervise students, control electronic equipment, or otherwise have occasion to observe student use of said equipment online shall make reasonable efforts to monitor the use of this equipment to assure that it conforms to the mission and goals of the Living Waters Catholic Schools.
2. Staff should make reasonable efforts to become familiar with the Internet and its use so that effective monitoring, instruction, and assistance may be achieved.

User Responsibilities

1. Use of the electronic media provided by Living Waters Catholic Schools is a privilege that offers a wealth of information and resources for research and learning. Where it is available, this resource is offered to staff, students, and other patrons at no cost. In order to maintain the privilege, users agree to learn and comply with all of the provisions of this agreement.

Acceptable Use

1. All use of the Internet must be in support of educational and research objectives consistent with the mission and objectives of Living Waters Catholic Schools.
2. Proper codes of conduct in electronic communication must be used. In news groups, giving out personal information is inappropriate. When using e-mail, extreme caution must always be taken in revealing any information of a personal nature.
3. Network accounts are to be used only by the authorized owner of the account for the authorized purpose.
4. All communications and information accessible via the network should be assumed to be private property.
5. Subscriptions to mailing lists and bulletin boards must be reported to the system administrator. Prior approval for such subscriptions is required for students and staff.
6. Mailing list subscriptions will be monitored and maintained, and files will be deleted from the personal mail directories to avoid excessive use of fileserver hard-disk space.
7. Exhibit exemplary behavior on the network as a representative of your school and community. Be polite!
8. Living Waters Catholic Schools will make determinations on whether specific uses of the network are consistent with the acceptable use practice.

Unacceptable Use

1. Giving out personal information about another person, including home address and phone number, is strictly prohibited.
2. Any use of the network for commercial or for-profit purposes is prohibited.
3. Excessive use of the network for personal business shall be cause for disciplinary action.
4. Any use of the network for product advertisement or political lobbying is prohibited.
5. Users shall not intentionally seek information on, obtain copies of, or modify files, other data, or passwords belonging to other users, or misrepresent other users on the network.
6. No use of the network shall serve to disrupt the use of the network by others. Hardware and/or software shall not be destroyed, modified, or abused in any way.
7. Malicious use of the network to develop programs that harass other users or infiltrate a computer or computing system and/or damage the software components of a computer or computing system is prohibited.
8. Hate mail, chain letters, harassment, discriminatory remarks, and other antisocial behaviors are prohibited on the network.
9. The unauthorized installation of any software, including shareware and freeware, for use on Jurisdiction owned computers is prohibited.
10. Use of the network to access or process pornographic material, inappropriate text files (as determined by the system administrator or building administrator), or files dangerous to the integrity of the local area network is prohibited.
11. Living Waters Catholic Schools' network may not be used for downloading entertainment software or other files not related to the mission and objectives of Living Waters Catholic Schools for transfer to a user's home computer, personal computer, or other media. This prohibition pertains to freeware, shareware, copyrighted commercial and non-commercial software, and all

other forms of software and files not directly related to the instructional and administrative purposes of Living Waters Catholic Schools.

12. Downloading, copying, otherwise duplicating, and/or distributing copyrighted materials without the specific written permission of the copyright owner is prohibited, except that duplication and/or distribution of materials for educational purposes is permitted when such duplication and/or distribution would fall within the Fair Use Copyright Law.
13. Use of the network for any unlawful purpose is prohibited.
14. Use of profanity, obscenity, racist terms, or other language that may be offensive to another user is prohibited.
15. Playing games is prohibited unless specifically authorized by a teacher for instructional purposes.
16. Establishing network or Internet connections to live communications, including voice and/or video (relay chat), is prohibited unless specifically authorized by the system administrator.
17. The use of personal or Jurisdictional electronic devices to record voice and/or video of a staff member(s) or student(s) without their express permission is prohibited.
18. The use of any proxy avoidance software, web sites or hardware devices whose intent is to circumvent the division firewall and filter systems is prohibited.
19. Connecting to the wired networks with personal devices.
20. Peer-to-peer software use is prohibited on the Juristictions wireless network.
21. Student owned devices are to be used only with the permission of a staff member.

Definitions:

Network - to be defined as any method of electronic information access either through wired, wireless or cellular connection while either in a division building or utilizing division owned hardware.

File server space - to be defined as any data or file storage resource made available to students or staff. This includes site file servers and cloud resources obtained through the division.

Disclaimer

1. Living Waters Catholic Schools cannot be held accountable for the information that is retrieved via the network.
2. Living Waters Catholic Schools will not be responsible for any damages you may suffer, including loss of data resulting from delays, non-deliveries, or service interruptions caused by our own negligence or your errors or omissions. Use of any information obtained is at your own risk.
3. Living Waters Catholic Schools makes no warranties (expressed or implied) with respect to:
 - o the content of any advice or information received by a user, or any costs or charges incurred as a result of seeing or accepting any information; and
 - o any costs, liability, or damages caused by the way the user chooses to use his or her access to the network.
4. Living Waters Catholic Schools reserves the right to change its policies and rules at any time.
5. Living Waters Catholic Schools is not responsible for the loss, theft, or damage of any personal devices. Responsibility for personally owned devices remains with the owner of the device at all times.

User Agreement (to be signed by all adult users and student users above grade 5)

I have read, understand, and will abide by the above Acceptable Use Agreement when using computer and other electronic resources owned, leased, or operated by the Living Waters Catholic Schools, including accessing the Jurisdictional network via personally owned devices. I understand school and district staff members may access my personal devices if there are reasonable grounds to believe there has been a breach of school rules, the Code of Conduct, or the Law and that a search of the device would reveal evidence of the breach. This may include, but is not limited to, audio and video recordings,

photographs, etc. taken on school property that violate said policies. I further understand that any violation of the regulations above is unethical and may constitute a criminal offense. Should I commit any violation, my access privileges may be revoked, school disciplinary action may be taken, and/or appropriate legal action may be initiated.

User Name (please print)

User Signature

Date

Parent Agreement (to be signed by parents of all student users under the age of eighteen)

As parent or guardian of [please print name of student] _____, I have read the Acceptable Use Agreement. I understand that this access is designed for educational purposes. Living Waters Catholic Schools has taken reasonable steps to control access to the Internet, but cannot guarantee that all controversial information will be inaccessible to student users. I agree that I will not hold Living Waters Catholic Schools responsible for materials acquired on the network. Further, I accept full responsibility for supervision if and when my child's use is not in a school setting. I hereby give permission for my child to use network resources, including the Internet that are available through Living Waters Catholic Schools.

Parent Name (please print)

Parent Signature

Date

MEDICAL CARE APPLICATION AND RELEASE (2018-2019)

(Complete form only if students medication is administered/stored at school)

STUDENTS NAME:

First Name	Surname	Age	Grade
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Name of Parent/Guardian: _____

MEDICATION AND OR MEDICAL TREATMENT REQUIREMENTS (To be completed by the Parent/Guardian)

1. Medication(s) and/or Medical Treatment which the student requires:

2. Medical condition(s) which make(s) the medication(s) and/or medical treatment necessary:

3. Daily dosage and frequency of administration (include time of day): _____
4. Description of Medical Treatment (attach a statement from the Physician detailing the medical treatment procedures)
5. Storage requirements for medications(s): _____
6. Need for staff assistance for medication: YES ____ NO ____ If yes, explain the need:

7. Possible side effects of medication requiring emergency action: _____

PHYSICIAN'S ENDORSEMENT (if required by principal)

1. The information provided by the parent above is correct.
2. The assistance required of staff is within the competence of a person untrained in medical procedures.

Signature of Physician: _____ Date: _____

ACKNOWLEDGEMENT BY PARENT

1. Primary responsibility for the administration of medication rests with the student and the student's parents.
2. Any change in the student's medical condition, medication or medical treatment is to be brought to the attention of the principal promptly.
3. Action taken by staff will be limited to what is possible in a school setting and to what can be done by persons untrained in medical procedures.
4. This Medical Care Application and Release Form is valid only for the school, and school year, in which it is submitted.

WAIVER

In signing this form, the parent or legal guardian releases Living Waters Catholic Regional Division # 42, its servants, employees and agents from and against all claims, suits, demands and actions whatsoever taken now or in the future which may arise by reason of the administration of medication or medical treatment to the student. The action taken by staff as requested above is both requested and authorized. Staff are authorized to take emergency action as deemed appropriate.

Signature: _____ Date: _____

Note: All medication must be in its original packaging.



Northern Gateway
Public Schools

**Student Transportation Registration Form
2018 to 2019 School Year**

Box 699 - Valleyview, Alberta T0H 3N0
524-3833 or 1-888-785-3396
Fax 780-524-4256

**PLEASE RETURN THIS FORM PROMPTLY TO YOUR SCHOOL
or to the address above**

Dear Parents:

Please complete one of these forms for each of your children that are new to the school or are changing school and riding school buses operated by the Northern Gateway Regional Division No.10. Upon completion, please return the form(s) to the address above, or return them to your school who will submit them to the Transportation Office. Please make sure the legal description of your residence is correct, as this information is needed for routing the buses. Students who are not registered will not receive bus service.

PLEASE PRINT

NAME OF PUPIL: _____ SCHOOL _____ GRADE _____ Gender _____

ADDRESS: _____ (Apt No)

ADDRESS: _____ (Street)

LAND LOCATION (rural): **Rural Address sign number:** _____

NE NW SE SW Sec. _____ Twp. _____ Rge. _____ W5

Sub. Div. _____ Lot _____ Blk. _____ Plan _____

P. O. Box _____

Town _____ Postal Code _____

Home Contact Name: _____ Home Phone No. _____

Work Contact Name: _____ Work Phone No. _____

Emergency Contact Name: _____ Emergency Phone No. _____

PERTINENT MEDICAL INFORMATION REGARDING YOUR CHILD:

Printed Name of Parent or Guardian

Signature of Parent or Guardian

Date

Starting Date (am/pm)

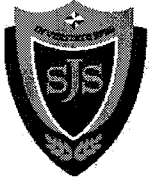
(Office Use Only)

BUS NO. _____ Driver _____ Pick-up Point _____

Eligible (n/y) _____ Amount Paid _____ Pick-up time: _____ Drop-off Time: _____

Paid By: Cash Cheque Visa

Date Moved in _____ Date Moved Out _____ Pass No _____



ÉCOLE
St. Joseph
SCHOOL

5575 McIlwaine Dr.
Whitecourt, AB T7S 0G6
TEL (780) 778-2345
FAX (780) 778-2008
www.livingwaters.ab.ca

REQUEST AND AUTHORIZATION TO RELEASE STUDENT RECORDS

Dear Sir/Madam:

The following student(s) has/have transferred in to St. Joseph School in Whitecourt, Alberta. It would be appreciated if you would forward the student(s) cumulative records, testing results, and any other educational data or confidential records which will assist us in setting up their school program.

Student Name(s): _____

Grade: _____

Alberta Learning Student Record Regulation Section 6(1) states:

"If a student transfers to another school in Alberta, the board from which the student transfers shall on written receipt from that school, send the student record containing the information referred to in section 2(1)(2) to that school."

Principal: Ashley Floyd

The following is to be completed only if a record is being requested from outside Alberta:

Permission is hereby granted to _____ to release the
(name of previous school & city/town)

student record to the school at the address above.

Date

Signature (parent, guardian or independent student)



Living Waters Catholic Schools
REGIONAL DIVISION No.42