

Registering for The French Immersion Program? YES NO

**K** – 12 REGISTRATION FORM

For Office Use Only In	formation Verified by (Staff Name)		<u>Staff</u>
C.	ATCHMENT SCHOOL:	Date:	<u>Initial</u>
Current Year – Enrollment Date	e:	Grade:	
Next Year: Date of Registration	n: Time o	of Registration:	Current/Next Grade:
□ Cross Boundary: □ Yes □	No If Yes, Name of Cross Bound	ary School Requested:	
<b>REGISTRATION DOCUMENTATIO</b>	N:		
Proof of Age:	Proof of Residency:	Proof of Physical Addres	s (catchment area schools only):
Birth Certificate	Driver's License	Driver's License	
Certificate of citizenship	Rental Agreement	Proof of Purchase of I	Residence
Immigration Canada documents	Municipal Tax Bill	Municipal Tax Bill	
Passport	Utility Bill	Notary Authorized Let	ter
Permanent Resident Card`	Parent's Care Card	Rental Agreement, ac	companied with:
_Indigenous Status Card	Parent's BC Services Card	Hydro,Gas	,Cable orTelephone Bill
Driver's License (if over 19)		Mortgage Statement	

### **STUDENT INFORMATION:**

Legal Last Name:	Usual Last Name:				
		Usual First Name:			
Legal Middle Name:	Usual Middle Name	Usual Middle Name:			
Birth Date: A		□ F / Preferred: □ M □ F □ Transgender			
(DD-MM-YYYY)		(If Applicable)			
Home Phone No	Cell Phone No				
Student Email (if applicable):					
Address:					
Mailing Address if different from above:					
CITIZENSHIP: Country of Birth:	Citizen of:	Immigration Status:			
LANGUAGE: At Home	Most Used	First			
INDIGENOUS ANCESTRY:  NO Inuit Metis Non-Status	/ If <b>YES</b> , please tick the applicable and □ Status-Off Reserve □ Status-On R				
Band of Origin:	Band of Residence: _				
PREVIOUS SCHOOL:	District #	: City:			
		Name of School:			
	□NO				
MEDICAL: Care Card Number:	Doctor's Name:	Phone:			
□ Student has potentially life threatening	condition. Details:				
Please arrange a meeting with the school	l Principal if the student has a medically	diagnosed life-threatening condition.			

To be filled out by Principal or designate when a life threatening medical condition exists: 
Doctor's Note Requested
Doctor's Note Received

#### SPECIAL NEEDS or LEARNING CONSIDERATIONS:

Identified Learning Needs / Special Needs: 
Yes No Specify:

Student currently has an Individualized Education Plan (IEP): 
Yes 
No If yes, current designation(s):

Other information:



# PARENTS(GUARDIANS) & CONTACTS

Parent/Guardian #1:       Relationship:	Parent/Guardian #2:       Relationship:         Last Name:
EMERGENCY CONTACT INFORMATION:	(Other than Parents / Guardians)
Contact #3: Relationship:	Contact #4: Relationship:
Last Name:	Last Name:
Contact #5: Relationship:	Contact #6: OUT OF DISTRICT CONTACT
Last Name:	Relationship:
First Name:	Last Name:
	Sibling #2 Relationship:
Sibling #1         Relationship:           Name:	Sibling #2       Relationship.         Name:
Sibling #3 Relationship:	Sibling #4 Relationship: Name:
DOB: Age:Grade: Gender: School: Other Notes or Comments:	DOB: Age:Grade: Gender: School:
I verify that the information contained in this registration is accurately Parent/Guardian Name ( <i>Please print</i> ):	
Parent/Guardian Signature (if student is under 19):	Date

The information on this form is collected under the authority of the School Act, Sections 13 & 79; and may be used by the District for Ministry of Education reporting; demographic, enrolment, budget facility and operational analysis. It will be kept secure and confidential in accordance with the Freedom of Information and Protection of Privacy Act.

## Photograph, Video, and Media Consent Form



#### File No. 1025.15

School Districts must comply with the *Freedom of Information and Protection of Privacy Act* which sets out the privacy rights of individuals and provides regulations on protecting personal information for the public sector.

Mission Public Schools must have consent to collect, use, and publicly release photographs, videos, and audio of students.

### Please complete the information below and return this form to your school.

Student names or images may be shared for the following purposes:

1. School yearbooks

**YES**, I consent for the release of my child's personal information for the prescribed purpose outlined above.

**NO**, I do not consent for the release of my child's personal information for the prescribed purpose outlined above.

 School and / or school district website, newsletter, social media sites, or videotaping in the classroom and / or during special events for presentation purposes.

**YES**, I consent for the release of my child's personal information for the prescribed purpose outlined above.

**NO**, I do not consent for the release of my child's personal information for the prescribed purpose outlined above.

Student Name:
School:
Parent/ Guardian Name:
Parent/ Guardian Signature:
Date:

**NOTE:** Mission Public Schools does not have control over public events at which individuals voluntarily appear or attend, and external media is present.

The information described above is collected in accordance with **Section 26 (c) (d) and (g)** of the *Freedom of Information and Protection of Privacy Act*. Mission Public Schools must seek consent to disclose personal information for the examples listed above. Questions and concerns should be directed to the School Principal or the District Privacy Coordinator.

This form was last revised: September 11, 2020

Mission Public Schools Privacy Officer: Angus Wilson and Corien Becker Mission Public Schools Privacy Coordinator: Aleksandra Crescenzo Email: info.sd75@mpsd.ca

### Network, Internet and Wi-Fi Access User Agreement Form for Students K – 12



The personal information on this form is collected by School District No. 75 (Mission) under the authority of the School Act. The information will be used for educational purposes. This information will be protected under the Freedom of Information and Protection of Privacy Act. Questions about the collection and use of this information should be directed to the Information and Privacy Coordinator, School District No. 75, 33046 4th Avenue, Mission, BC, V2V 1S5, 826-6286.

#### **Student Section**

Student Name: \_\_\_\_\_

Div:

Grade: \_\_\_\_ School: \_\_\_\_

I have read the Internet & Wi-Fi Access for All Users of the School District Computer Network policy and regulations and I agree to follow the rules and regulations in the policy. I understand that if I violate the rules, my account can be terminated and I may face other disciplinary measures.

Student Signature: Date:

#### Parent or Guardian Section

Students under the age of 19 must also have the signature of a parent or guardian who has read this agreement.

As the parent or guardian of the above-named student, I have read the Internet & Wi-Fi Access Agreement for All Users of the School District Computer Network Policy and Regulations and agree to abide by the provisions therein. I understand that network services are intended for educational purposes.

In consideration of the privilege of using the MPSD.CA Network, I hereby release the district, its personnel and any institutions with which it is affiliated, from any and all claims and damages of any nature arising from my child's use of, or inability to use, the MPSD.CA Network, including, but not limited to claims that may arise from the unauthorized use of the system to purchase products or services.

I will instruct my child regarding any restrictions against accessing material that are in addition to the restrictions set forth in the District Student Acceptable Use Policy and Regulations. I will emphasize to my child the importance of following the rules for personal safety and understand that it is impossible for the School District No. 75 (Mission) to restrict access to all controversial materials, and I will not hold School District No. 75 (Mission) responsible for materials acquired via its networks.

I give permission for \_\_\_\_\_ (name of student) to access the SD75.MISSION Network and/or the Internet and/ or Wi-Fi and certify that the information contained in this form is correct.

Parent/Guardian Signature:	Date:
Parent/Guardian Name:	
Home Address:	Phone:

#### This form will be retained at the office of the enrolling school of the student.



The Board of Education will set appropriate standards for users to access the MPSD Network, Internet, and Wi-Fi Access in order to perform work and studies. This use must not jeopardize operation of the School District Network or the reputation and/or integrity of the School District.

#### **General Guidelines**

Internet Usage

- Users must comply with all applicable laws and regulations and must respect the legal protection provided by copyright and licenses with respect to both programs and data.
- Internet usage must be able to withstand public scrutiny and/or disclosure. Sites should be accessed in accordance with the criteria established in the Selection of Supplementary Learning Resource Materials Administrative Procedure #212.
- Sensitive information must not be transmitted via or exposed to Internet access.
- Internet usage must be consistent with professional conduct and not for personal financial gain.
- Users must not attempt to obscure the origin or any message or download material under an assumed Internet address.
- Administrators must ensure that all student users sign a Network, Internet and Wi-Fi Access User Agreement Form for Students K -12 before access is allowed. Parents/guardians will be advised by the School District that they can withdraw their consent at any time.
- The Systems Administrator monitors the use of the School District network and will monitor selected network traffic at the request of School District administration or the Ministry of Education.

#### Responsibilities

Users

- Users are responsible for ensuring that their use of the MPSD Network, Internet and Wi-Fi is appropriate and consistent with this policy.
- Users with an Access Agreement completed are personally responsible for the security of their user account, if one is granted, as follows:
  - Passwords must not be disclosed to any other individual.
  - Responsible for all activity that occurs within their account.
  - Notifying the immediate supervisor, teacher or systems administrator immediately if a security problem is suspected.
- Users are responsible for informing a teacher, an administrator or the system administrator if they mistakenly access inappropriate information or receive any message that they feel to be inappropriate.
- Users are responsible for following virus protection procedures to avoid the spread of computer viruses.
- Users are responsible for checking their email on a regular basis and for deleting unwanted messages.

#### Administrators

• Administrators are responsible for ensuring that all students review this policy, the Computer Network Administrative Procedure # 601 and Internet Access for Students and Staff: Safe Practices Administrative Administrative Procedure #210b Network, Internet, and Wi-Fi Procedure for Students K – 12



Procedure #107. These policies are to be reviewed annually with users and parents of students to ensure they are aware of their obligations and responsibilities.

• Administrators and supervisors are responsible for taking appropriate action when this policy is contravened.

#### Systems Administrator

- The District Systems Administrator is responsible for monitoring network usage in term of traffic/load.
- On an annual basis, the systems administrator will delete all non-renewed network access agreements (i.e. graduated students, students who do not have parental and/or school permission, students who have withdrawn, transferred, etc.).
- Students that leave the School District, will have their accounts disabled. Student's accounts will be purged and deleted at the end of each school year.
- Limited privacy is afforded to student personal files on the School District network through routine maintenance and monitoring of the system.
  - Pursuant to the School Act, parent(s)/guardian(s) have the right to view the contents of their student's files.
  - A search will be conducted if there is a reasonable suspicion that a student has breached the rules and regulations governing use of the MPSD.CA network, the District Code of Conduct Policy #19, or the law.
- The School District will cooperate fully with law enforcement officials conducting an investigation into illegal activities related to student use of the MPSD.CA network.

#### Safe Practices

- The MPSD.CA network must not be used for any of the following. Engaging in any of these activities may be considered an illegal act and subject to an investigation by school and/or law enforcement officials.
  - transmitting any materials in violation of Canadian laws;
  - violating, or attempting to violate, the security of the district's computers, data or network equipment or services;
  - offering, providing or purchasing products or services;
  - political lobbying;
  - posting or linking personal and/or private information about themselves or other people. (See the Information and Privacy Act for a definition of *personal information*);
  - knowingly or recklessly posting false or defamatory information about a person or organization;
  - engaging in personal attacks, including prejudicial or discriminatory attacks;
  - using obscene, profane, lewd, vulgar, rude, inflammatory, threatening or disrespectful language at any time;
  - harassing another person;
  - posting chain letters or sending unnecessary messages (spamming) to a large number of people;
  - posting information that could cause damage or danger;
  - plagiarizing works found on the Internet;
  - accessing material that is profane or obscene (pornography), that advocates illegal acts, or that advocates violence or discrimination (hate literature);
  - pursuing unauthorized access or attempt to access another person's accounts, files or computer;
  - attempting to spread or create computer viruses, destroy data or disrupt the computer system in any way;
  - engaging in any act that contravenes the District Code of Conduct Policy #19.



#### Date Adopted: October 2001

#### Date Amended: April 2018

Definition:

- "User" means students authorized to access the network, internet and Wi-Fi via a School District service provider and.
- "Internet" means the global interconnection of data networks that commonly use (but are not limited to) the Internet Protocol.
- "Sensitive Information" means personal, confidential or protected information whose release is unauthorized – i.e. information which is reasonably likely to be accepted or excluded from access under the Freedom of Information and Protection of Privacy Act.
- "Offensive material" includes, but is not limited to, pornography, hate literature or any material which contravenes the BC Human Rights Act.

Cross Reference: District Code of Conduct Policy #19

Internet Access for Students & Staff: Safe Practices Administrative Procedure #107 Selection of Supplementary Learning Resource Materials Administrative Procedure #212

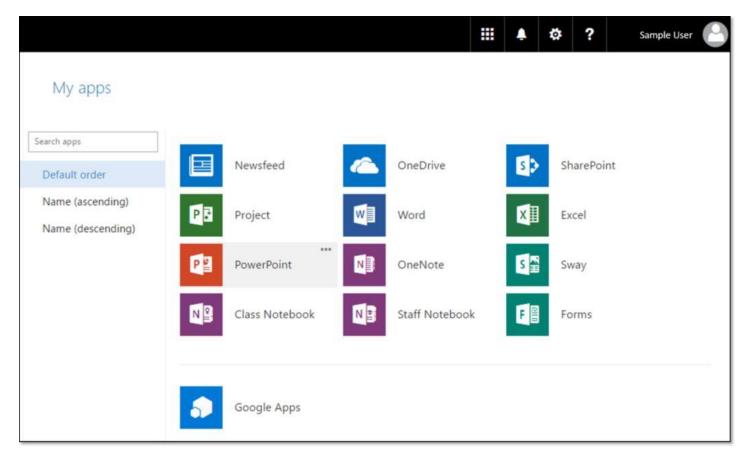


# What is Office 365

**Office 365 Education** is a collection of services that allows you to collaborate and share your schoolwork. It's available for free to teachers who are currently working at an academic institution and to students\* who are currently attending an academic institution. The service includes Office Online, and OneDrive online file storage. This service also allows teachers and students to install the full Office applications on up to **5 PCs or Macs for free**.

### Students MUST have parent permission granted for Office 365

This form is initially completed at Kindergarten entry or by new students to Mission, and when a student is transitioning from Elementary to Middle, and Middle to Secondary School.





# Office 365

#### Dear Parent/Guardian:

Students will be provided with personal user accounts to create and manage their school assignments through Office 365.

As a school district, we are subject to the *BC Freedom of Information and Protection of Privacy Act*. This requires the school district to ensure families provide consent for educational digital resources. This is in accordance with s.26(c) of the *Freedom of Information and Protection of Privacy Act* (FOIPPA). Students' creations will be archived as an educational project under the authority of s.27(1)(a)(i) of FOIPPA and only accessible to the student who created it. In accordance with this Act, we must at all times protect the privacy of students under our care.

\_\_\_\_\_, School Principal

School Address and Contact Information:

#### **Consent:**

**Office 365** - I have read the above information from \_\_\_\_\_\_\_ School and understand that when implementing a web-based service we will be creating personal, private accounts for students. I understand that the objective of *Office 365* is to enable opportunities to create and manage school assignments. Students who are not granted permission by their parents will not be penalized and alternative assignments will be provided.



I consent to my child using Office 365.

By signing this Agreement, I on my own behalf or, as applicable, on behalf of my child, understand and agree that:

• Student's work in *Office 365* may be accessed by the student's teachers, school based administrator and you as the invited parent.

This consent will be considered valid from the date at which it is signed and must be completed another time when the student transitions to the next education level. I also hereby acknowledge that I have read and understood the above information on *Office 365*.

Print Name of Student	Grade	Date	
Signature of Parent or Guardian	Date		
*For parants who have court orders des	cribing their parental rights	this form should be signed by a parent who has t	ha

\*For parents who have court orders describing their parental rights, this form should be signed by a parent who has the right to exercise the student's privacy protection rights.

This form must be returned, signed and dated, to the student's school so that an Office 365 account can be created.



# **Consent Form** *All About Me*

Dear Parent/Guardian:

School will be using All About Me which is a product of myBlueprint. Students in grades K-6 will be provided with personal user accounts to engage in the process of learning, reflection, and self-discovery with a digital portfolio. This form is initially completed at Kindergarten entry or by new students to Mission.

As a school district, we are subject to the *BC Freedom of Information and Protection of Privacy Act*. This requires the school district to ensure families provide consent for educational digital resources. This is in accordance with s.26(c) of the *Freedom of Information and Protection of Privacy Act* (FOIPPA). Students' creations will be archived as an educational project under the authority of s.27(1)(a)(i) of FOIPPA and only accessible to the student who created it. In accordance with this Act, we must at all times protect the privacy of students under our care.

\_\_\_\_\_\_--School Principal School Address and Contact Information:

#### **Consent:**

**myBlueprint** - I have read the above information from \_\_\_\_\_\_School and understand that when implementing a web-based service we will be creating personal, private accounts for students. I understand that the objective of this service is to enable digital tools for students to explore education. Students who are not granted permission by their parents will not be penalized and alternative assignments will be provided. I also recognize that I may be invited to view my child's work in My Blueprint and as a guest I will be respectful of not sharing classroom photos that may be posted by my child.



I consent to my child using myBlueprint

By signing this Agreement, I on my own behalf or, as applicable, on behalf of my child, understand and agree that:

• Student's work in *myBlueprint* may be accessed by the student's teachers, school based administrator and you as the invited parent.

I also hereby acknowledge that I have read and understood the above information on the use of All About Me and myBlueprint. This consent will be considered valid **from the date at which it is signed.** 

Print Name of Student	Grade	Date	Date	
Signature of Parent or Guardian	Date			

\*For parents who have court orders describing their parental rights, this form should be signed by a parent who has the right to exercise the student's privacy protection rights.

This form must be returned, signed and dated, to the student's school so that *All About Me* portfolio can be activated for the student named above.



# BC School Fruit and Vegetable Snack & Dairy Programs

Our school was very fortunate to be selected to participate in the BC School Fruit and Vegetable Snack & Dairy Programs this year. Students will receive a free snack twice a week every other week. This snack is not meant to replace food normally consumed at recess or lunch. The goal is to increase fruit and vegetable consumption. Fruits and vegetables contain vitamins, minerals, phytochemicals, antioxidants, and fibre that promote health and prevent disease. Studies show that Canadians in general are not eating enough fruits and vegetables. Eating one more fruit or vegetable a day can make a difference. The fruit will be delivered to the school already washed and ready for consumption. We will also be participating in a dairy (milk) program.

There is no cost to have your child participate in this wonderful program. We do however ask that you complete the bottom of this form and return it to the school as soon as possible.

Sincerely,

Dr. Lisa Clarke School Principal

### **BC School Fruit and Vegetable Snack & Dairy Programs**

I give permission for my child \_\_\_\_\_\_ to participate in the BC School Fruit and Vegetable Snack & Dairy Program being offered at Windebank Elementary.

\_\_\_\_\_ No, my child does not have any food allergies.

Yes, my child has food allergies, which are:

Parent/Guardian signature

Date

### Kindergarten Questionnaire

In an effort to better understand the social, emotional, and developmental experiences your child h pre-Kindergarten years, please answer these questions to the best of your abilities. Thank-you!	as hac	d in their
Student Name:		
1. Did your child attend preschool last year?	Yes	No
If yes, the name of the preschool		
2. Has your child attended daycare or any early childhood programs (Strong Start, Family Place, Jun	np Sm <b>Yes</b>	art, etc.)? <b>No</b>
If yes, which programs		
3. Has your child received supports or a referral from child supported development (i.e. Speech and Support, OT/PT Support, Behaviour Intervention, Counselling)?	d Lang <b>Yes</b>	uage <b>No</b>
If yes, with whom?		
4. Do you or your doctor have any questions or concerns regarding your child's developmental prop	gress?	Yes No
If yes, please indicate the questions/concerns		
5. Have you ever received a referral for assessment or are in the process of assessment? (Sunny Hil Centre, etc.)	l, Asar <b>Yes</b>	nte No
If yes, please indicate assessment facility		
6. Does your child have older siblings in the school?	Yes	No
If yes, please identify name/age		
7. What age will your child be entering Kindergarten in September?		
8. Will your child be in before or after school care when they have started Kindergarten Yes	s No	
9. Who are some friends starting Kindergarten this year?		

Student Name: \_\_\_\_\_

Please rate your child is in relation to other children the same age?	Below	Average	Above
"X" the box which best describes	Average		Average
Separation anxiety/anxiety			
Physical play			
Energy level			
Compassion for others			
Transitions easily to a new task (even if the current task is incomplete)			
Is a "boss"			
Shyness			
Safety awareness			
Handles not getting his/her way			
Sharing/Turn taking			
English comprehension and oral language			
Play independently			
Focus on a given activity for up to 5 minutes			
Manage bathroom needs independently			
Follow directions			
Has tantrums			

# My child ("X" beside all that apply):

Knows some letters	in CAPITOL f	orm	in lov	wer case form	the sounds a letter makes
Knows some numbers	1-5	1-10		1-20	1-20+
Knows some basic shapes	circle	square	2	triangle	rectangle
Knows some colours	1-3	1-5		1-10	1-10+
Can print their name			Yes	No	
Can put their shoes on by th	emselves		Yes	No	
Can put their coat on by the	mselves		Yes	No	
Recognizes their name (i.e. o	on jacket tag o	r boots)	Yes	No	
Zip up their own coat			Yes	No	