OEN#:		**Grade:**
Teacher:		**Admit Date:**

York Region DISTRICT SCHOOL BOARD — **Inspire**Learning**!**

Secondary Student Registration Form

Information on this form will be used for home/school communications, planning and programming such as transportation, and to establish the Ontario Student Record.

PLEASE PRINT

Student Information

Legal Name - Family Name, First Name and Middle Name

Preferred Name - Last Name, First Name

Date of Birth: (yyyy/mm/dd)	Siblings at This School: ☐ Yes ☐ No Name: _____
Gender ☐M ☐F Grade	Name: _____

#/Street		Unit #	City/Town
P.O. Box or RR#	Township	Postal Code	Home Phone # Unlisted ☐

Medical Alert Information/ Disability/Allergies:

Country of Birth:	Country of Last Residence:
Province of Birth:	Arrival Date:
Country of Citizenship:	Status In Canada:
First Language:	Language(s) Spoken at Home:
Main Language Spoken at Home:	Student Identification Through IPRC ☐Yes ☐No Student has an IEP ☐Yes ☐No

If the student is considered to be of Indigenous ancestry, please check all categories that apply: ☐ First Nation   ☐ Métis   ☐ Inuit

Parent/Legal Guardian Information

Custody Information****:   ☐ Both Parents ☐ Mother Only ☐ Father Only ☐ Shared ☐ Joint ☐ Guardian ☐ C.A.S.

Living With: ☐ Both Parents ☐ Mother Only ☐ Father Only ☐ Guardian ☐ Other ☐ C.A.S.

Note: ****Written Custody Agreement or Court Order should be retained in the students' OSR.

Parent/Guardian Information #1

Name - Last Name, First Name:

Relationship to Student:	Gender ☐ M ☐ F	Salutation:

Emergency Contact Priority: 1☐ 2 ☐ 3 ☐	School Closure Contact Priority: 1 ☐ 2 ☐ 3 ☐

Guardian: ☐   Custody: ☐   Lives with Student: ☐

Access to Records: ☐   Speaks School Language: ☐   Receives Mail: ☐

Home Phone #	Business Phone #	ext.
Cell Phone #	Email address	

Address (if different from student) #/Street:

City/Town	Unit #	P.O. Box or RR#	Township	Postal Code

Parent/Guardian Information #2

Name - Last Name, First Name:

Relationship to Student:	Gender ☐ M ☐ F	Salutation:

Emergency Contact Priority: 1☐ 2 ☐ 3 ☐	School Closure Contact Priority: 1 ☐ 2 ☐ 3 ☐

Guardian: ☐   Custody: ☐   Lives with Student: ☐   Special Custody: ☐

Access to Records: ☐   Speaks School Language: ☐   Receives Mail: ☐

Home Phone #	Business Phone #	ext.
Cell Phone #	Email address	

Address (if different from student) #/Street:

City/Town	Unit #	P.O. Box or RR#	Township	Postal Code

Emergency Contact Information (other than Parent)

Name - Last Name, First Name	Gender ☐ M ☐ F
Relationship to Student:	Emergency Contact Priority: 1☐ 2 ☐ 3 ☐
Home Phone #	School Closure Contact Priority: 1☐ 2 ☐ 3 ☐

Business Phone #	Cell Phone #	E-Mail Address:

Educational Background

Previous School Attended:			
Address #/Street:			
City:	Province/State:	Country:	Postal Code:

Previous Board Attended:	
Departure Date:	Last Grade Attended:

Home School (if attending on a transfer):		
Transfer Reason:	First Entry into Secondary School (yyyy/mm/dd)	
Has your child ever been expelled from another school? Yes ☐ No ☐		If yes, was the student re-admitted? Yes ☐ No ☐
Is this student currently under suspension from any school? Yes☐ No☐	If Yes, Name of School:	

Canada's Anti-Spam Legislation (CASL) Important Information to Parents/Guardians

The school requires your consent to receive any electronic messages which contain advertising or promotions such as school fundraisers, lunch programs, field trips, sale of yearbooks, purchasing of student photos, books, prom or dance tickets and athletic events where a financial transaction is required.

Do you consent to receive electronic messages of this nature?   ☐   Yes   ☐   No

Note: You will continue to receive emails on all other school matters.

Notice to Parents/Guardians

Personal information is collected at registration pursuant to the *Education Act and the Municipal Freedom of Information and Protection of Privacy Act*. Questions about the collection and use of this personal information should be directed to the Privacy Office, York Region District School Board, 60 Wellington Street West, Box 40, Aurora, Ontario L4G 3H2 or (905) 727-3141, Extension 2015.

I hereby certify that the above information contained on this form is accurate

_____   _____   _____
Signed (Parent/Guardian)   (Print Parent/Guardian Name)   Date

Note: The 'Required Documentation' form MUST be signed and attached to this Registration Form then filed in the OSR and remains until 5 years post retirement for Ministry audit purposes. If student leaves YRDSB, it is removed before the OSR is sent. ONLY the proof of birth document is to be copied and retained until the OEN verification takes place, after which it must be DESTROYED. NO OTHER identity documents are to be copied and filed.

Elementary and Secondary Registration - Required Documentation

Student Number:	OEN#:

Track:	Grade:	Homeroom:	Register:

Program:	Admit Date:	Admit Code:

Bussing Required: ☐Y ☐N

OSR Status:	Requested Date:	Received Date:

OEN Status:	Requested Date:	Received Date:

Note: Birth Verification Documents can be copied for future OEN verification. Once that occurs the record MUST be destroyed.

Check appropriate boxes below then verify accuracy by completing the **Sign Off** section on Page 4.

School Records

☐ Transcript ☐ Most Recent Report Card ☐ OSSLT ☐ Community Involvement Hours Completed _____

Birth Verification

☐ Birth Certificate/Statement of Live Birth/Birth Registration ☐ Passport/Study Permit/Visitor Record

☐ Refugee Claimant Form (IMM 1442) ☐ Citizenship Card/Certificate of Canadian Citizenship

☐ Permanent Resident Card (PRC) (Maple Leaf Card) ☐ Record of Landing (IMM 1000)

☐ Confirmation of Permanent Residence (IMM 5292) ☐ Certificate of Indian Status

☐ Baptismal Certificate ☐ Notice of Decision

☐ Legal Change of Name ☐ Immigration Papers, Specify: _____

Proof of Residency

☐ Property Tax Bill/MPAC Tax Roll # _____ ☐ Rental/Lease Agreement ☐ Utility Bill

☐ Agreement of Purchase and Sale ☐ Other:* _____

*Documents NOT Acceptable - Bank/Credit Card Statement, Cell Phone Bill, Driver's License

Citizenship and Immigrations Papers

Permanent Resident (check one)

☐ Parent/Guardian ☐ Student (if an adult) Date became a permanent resident: _____
(yyyy\mm\dd)

☐ Stage One Approval Letter Stage 1 Approval Letter Date: _____
(yyyy\mm\dd)

☐ Equivalent Documentation from Immigration, Refugees, and Citizenship Canada (IRCC) confirming approval in principle (specify below type of document with date)

Type of Document Reviewed: _____
Date: _____
(yyyy\mm\dd)

Refugee Status

☐ Documentation from IRCC confirming Refugee Status Date of Entry (stamped date on document): _____
(yyyy\mm\dd)

☐ Consideration of Eligibility (Convention Refugee) Date of Entry (stamped date on document): _____
(yyyy\mm\dd)

Parent's Study Permit

☐ Parent's Acceptance Letter confirming the parent will be a full-time student at a qualified university, college, or institution in Ontario (retain copy in child's OSR)

☐ Parent Study Permit
Parent's Study Permit valid from: _____ to _____
(yyyy\mm\dd) (yyyy\mm\dd)

Verify below that the parent is a full-time student enrolled in a program that leads to graduation with a postsecondary certificate, diploma or degree (check one): ☐ Certificate ☐ Diploma ☐ Degree

Parent's Work Permit

☐ Documentation from IRCC confirming approval of Work Permit (i.e. actual work permit to be issued at a later date)
☐ Parent Work Permit

Work Permit valid from: _____ to _____
                                      (yyyy\mm\dd)   (yyyy\mm\dd)

Student's Study Permit ***:
☐ Student Study Permit (Parent's work permit to be issued at a later date)

Study Permit valid from: _____ to _____
                                      (yyyy\mm\dd)   (yyyy\mm\dd)

Note: ***This student study permit is given to a child accompanying their parent on a work permit to Ontario.

Other:

☐ Minister's Permit to Come into/Remain in Canada   ☐ Student Study Permit/ Visitor Record (fee paying)   Expiry Date _____
                                                                                                                                                          (yyyy/mm/dd)

Confirmation of Documentation and Student Eligibility for ESL/PANA Funding

Country of Birth: _____   Citizen of: _____

Original Date of First Entry into Canada: _____
                                                                    (yyyy\mm\dd)

☐ Verified Canadian Stamped date of Entry on passport

☐ Confirmation of Permanent Residence Form 5292
   (Box 36 - Original Date of Entry and Box 45 - Date became a Permanent Resident)

☐ Permanent Resident Card (original date of entry)

☐ Consideration of Eligibility - Convention Refugees - Date stamped

Special Custody or Guardianship

☐ Yes   ☐ Copy of Family Court Order filed in OSR

Tax Support

☐ Public ☐ Separate	☐ Direction of School Support Form completed and filed in OSR. (only required for new students)	☐ Permission to Attend Form

ESL/ELD and Special Education

ESL/ELD Status: _____	Special Education:		Alternative Program	☐ Yes
Level:	SEA Claim (Circle Level) 1 2 3 4	Student has IEP: ☐Yes	French Immersion	☐ Yes

Sign Off - This form is to be completed and attached to the Registration Form.

Documentation Verified by:	_____	Date:	_____
Registration Entered By:	_____	Date:	_____

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