

SECONDARY STUDENT REGISTRATION FORM

Notice to Parent/Guardian

Thank you for your interest in a secondary school Catholic education with the Wellington Catholic District School Board. To register a new student, the parent/legal guardian is required to provide information to the school by completing this Registration Form. Please ensure that you complete all sections and provide the school with all of the original documentation required, as noted on the form.

Notice of Collection of Personal Information

Information on this Registration Form is collected under the legal authority of the *Education Act* and its regulations, and in accordance with the *Municipal Freedom of Information and Protection of Privacy Act*. Information collected on this form will be used to establish the Ontario Student Record (OSR) and for other student and educational related purposes, such as registration, administrative, communication, data reporting and transportation. The information may also be retained independently of the OSR for Ministry of Education reporting purposes. Questions or concerns about the collection of data on this form should be directed to the Principal of the school.

MISSION STATEMENT:

To continue to build a vibrant Catholic community committed to the celebration of each individual by fostering a love of learning, through quality educational experiences, enabling all to respond in a Christian way to the challenges of life.

GOVERNING VALUES:

We know: That witnessing the Good News of Jesus Christ is the foundation of Catholic education; That each learner is entitled to quality Catholic education; That Catholic education is a shared responsibility of home, Church, school, and community; That we are all unique and precious gifts of God; That our commitment is to foster the dignity and growth of each person in a nurturing, safe environment; That positive attitudes lead to success and happiness; That as Catholics we are called by our faith to serve others; That as an educational system we are committed to the official languages of Canada.

TO BE COMPLETED BY PARENT/GUARDIAN PLEASE PRINT CLEARLY.

STUDENT INFORMATION					An official Birth Certificate is required for proof of age.					
LEGAL LAST NAME					LEGAL FIRST NAME					
PREFERRED LAST NAME					PREFERRED FIRST NAME					
DATE OF BIRTH MONTH DAY			YEAR	GENDER: MALE FEMALE PREFER NOT TO SPECIFY PREFER TO SPECIFY		LEGAL M	IIDDLE NAME			
SIBLINGS: SCHOOL AGE	FIRST	NAME	L.F	AST NAME		1	GRADE	SCHOOL		
SIBLINGS: PRESCHOOL AGE	FIRST NAME LAST NAME								YEAR OF BIRTH	
EMERGE	NCY	CONTACT	INFOR	MATIC	N					
	e parent's					he school will contact information is correct ar				
CONTACT PER	SON #1	LAST NAME		FIRST	IAME	CONTACT PERSON #2	2 LAST N	AME	FIRS	ST NAME
HOME TEL# WORK TEL# CELL F		CELL PHO	NE#	HOME TEL. #	WOR	K TEL. #	CELL F	PHONE #		
ADDRESS				AN PICK UP TUDENT	ADDRESS		1	CAN PICK UP STUDENT		
RELATIONSHIP TO STUDENT				RELATIONSHIP TO STUDENT						

INTERNATIONAL STUDENT REGISTRATION PACKAGE

CONSENT FOR	RELEASE OF STI	UDENT INFORMATION	(FORM FOLA1)
	NEELAGE OF GIV		

Under Ontario law, the Wellington Catholic District School Board (WCDSB) is required to inform you about how your child's personal information is used and disclosed and obtain your consent.

The use of student images/voice/work is permitted, <u>without consent</u>, for educational programming and assessment purposes, or for other purposes consistent with its use and where there is a reasonable expectation that students may be identified (e.g. student displays of work or images displayed in the school hallways, recognition assemblies, participation in school sports events, student showcases of artwork or writing, graduation awards and programs, etc.).

1. STUDENT IMAGE/VOICE/WORKS

At the WCDSB, we regularly celebrate student achievement and showcase school activities to the wider community on a variety of communication platforms including, but not limited to, school or board newsletters, school and Board websites, social media, board publications, media reports, and promotional materials. We require your consent for your child's image/voice/works to be used for these purposes.

I hereby give my consent to the Board to record, film, photograph, audiotape or videotape my child's image/voice/works in the promotion of Catholic education, corporate-related activities, and media reports in a variety of communication platforms as outlined above. This consent is given voluntarily in accordance with the Municipal Freedom of Information and Protection of Privacy Act.
□ I consent to the use of Student Image/Voice/Works for the purposes outlined above.
☐ I do not consent to the use of Student Image/Voice/Works for the purposes outlined above.
2. MEDIA RELEASE CONSENT
The Wellington Catholic District School Board and its schools cooperate with media organizations, within reason, to encourage the celebration of Catholic Education, school achievements, sharing information about students and staff and their work and to report newsworthy events. For example, a media organization may want to: interview your child about a newsworthy event; film/photograph or
digitally record your child doing an activity; showcase your child's work or accomplishments. This will only be permitted with your

- ☐ I consent to the above use Media Release
- ☐ I do not consent to the above use Media Release

3. ANTI-SPAM CONSENT

consent.

Canada's Anti-Spam Legislation (CASL) prohibits the sending of commercial electronic messages, including e-mails and other forms of digital messaging if the electronic message encourages participation in a commercial activity, unless the sender has received the recipient's consent prior to sending the message.

The Wellington Catholic District School Board requires your consent to send any electronic messages (e.g. e-mail, electronic newsletter) which promote, advertise or offer for sale goods and services from your child's school. You may withdraw your consent at any time by notifying the school Principal, or by unsubscribing to any further commercial electronic messages you receive from the board/school.

notifying the school Principal, or by unsubscribing to any further commercial electronic messages you receive from the board/school.
☐ I consent to receive electronic messages as per the above Anti-Spam Legislation
☐ I do not consent to receive electronic messages as per the above Anti-Spam Legislation

I understand that this consent for the Use of Student Image/Voice/Works, Media Release and Anti-Spam may be withdrawn by me at any time with written notice to the principal or amended through the annual student information verification form. If you have any questions or concerns please contact your school principal.

NAME of PARENT/GUARDIAN	
SIGNATURE	DATE

FORM #6 - PUPIL TRANSPORTATION - STUDENT CODE OF CONDUCT

- 1. A student is expected to behave in accordance with the expectations of the principal and the Board at the pick-up and transfer points, and while travelling on the school bus.
- 2. A student will follow the driver's direction and co-operate with and assist the patrols in carrying out their duties.
- 3. A student is responsible for compensation for any damage which they case to school buses; where the student is a minor, compensation will be the responsibility of the parent.
- 4. Loading Procedures
 - a. Stay seated until the bus comes to a stop
 - b. Leave the bus in an orderly fashion
 - c. Line-up in a single file and board the bus in this orderly fashion when the driver indicates it is time to board
 - d. Wait for the driver's direction when he or she has to cross the road to board the bus; stay 5-8 paces in front of the bus when crossing.
- 5. Unloading Procedures
 - a. Stay seated until the bus comes to a stop
 - b. Leave the bus in an orderly fashion
 - c. Stay seated until the bus comes to a stop
 - d. Leave the bus in an orderly fashion
 - e. Continue up his or her laneway if it is directly beside the door of the bus
 - f. Stand away from the bus and wait until it has departed before walking to his or her laneway if it is on the same side of the road as the bus
 - g. Wait for the driver's direction before crossing the road if Wait for the driver's direction before crossing the road if his or her laneway is across the road
- 6. Bus students may only be picked up or discharged at designated stops.
- 7. Books, lunch boxes and bulky items must be kept on the student's lap.
- 8. A student must keep his or her arms and head inside the bus at all times.
- 9. No eating or smoking/vaping is allowed on the bus.
- 10. Only personal radios with earphones may be used.
- 11. Profane language is not permitted on the bus.
- 12. Students must be aware that serious or repeated misconduct will be recorded any may be reported. Such actions may result in disciplinary action including the loss of transportation privileges.

Visit w	Need Bus Information? ww.findmyschool.ca or call 519-824-	-4119
(PLEASE PRINT FULL NAME)	(SIGNATURE)	(DATE)
(PLEASE PRINT FULL NAME)	(SIGNATURE)	(DATE)
NAMES OF PARENT(S)/LEGAL GUAR	DIAN(S):	
SIGNATURE OF STUDENT:	E:	
STUDENT NAME (please print):		

FORM #7 - STUDENT USE OF TECHNOLOGY

Student Consent: Intermediate – Senior (Grades 9 – 12)

I agree to:

- I have read and understood Wellington Catholic District School Board's (the Board's) Appropriate Use of Technology and its related documentation, GSA. F.3., and recognize that it is governing my use of the technology on Board premises and that these documents are available on the board's website
- To abide by the policy and recognize that failure to comply with the policy may result in the loss of computer and/or network access privileges, financial compensation to the Board and other disciplinary actions consistent with the School's Code of Behaviour, Board Policy and/or legal authorities.

Student Name (Printed)		
Student Signature	 Date	

Parent/Guardian Consent

- I have read and understood the Wellington Catholic District School Board's Appropriate Use of Technology and its related documentation, GSA. F.3.;
- I recognize that the full policy and related documentation governing my child's use of technology is available on the board's website or from my child's school;
- I will emphasize the ethical and responsible use of technology and caution my child about unsafe communication with others on the internet;
- I grant permission for my child to access networked information technology, inclusive of the internet and email for educational purposes. I am aware that my child will be given instruction in the proper use of the internet at school and further recognize that I am responsible to supervise my child's use of the computer and internet at home:
- I agree to fully cooperate with the Board and any relevant investigating authority, should a serious infraction of the policy occur due to the use of non-Board owned technology, on Board premises.

Parent/Guardian Name (Printed)		
Parent/Guardian Signature	Date	

Information Collection Authorization: A current version of the policy and regulations, GSA. F.3., is available on the board web site at www.wellingtoncdsb.ca under the policies section. The personal information contained on this form has been collected under the authority of the Education Act R.S.O. 1980, C. 129, as amended and the Municipal Freedom of Information and Protection of Privacy Act, 1989. Information from this form will be used to enforce appropriate use of technology. Questions about the collection of this information should be directed to the school principal or to the Wellington Catholic District School Board's Freedom of Information/Protection of Privacy at (519) 821-4600. COPIES: (1) Student File (2) Parent (upon request)

FORM #9 - BRING YOUR OWN DEVICE

Bring Your Own Device (BYOD) Student

Personal use of equipment is guided by the following regulations:

- Students are required to adhere to the Appropriate Use of Technology Policy (APP.C.GSA.F.3).
- Student and parent/guardian are required to adhere to the Bring Your Own Device (BYOD) Policy (P.GSA.F.7)
- Students who are under the age of 18 must have written permission from a parent or legal guardian, prior to using the devices in school. This permission is required to be granted annually.
- Permission to use your own device in the classroom is at the discretion of the supervising teacher/staff.
- At no time, are student personal devices allowed in exams, tests or other events listed by the Board, the school or the teacher, as technology free.
- Any recording including but not limited to video, image or sound without authorization of the supervising teacher/staff is prohibited. Failure to comply with these regulations may result in revocation of privileges including the ability to access the Board Wi-Fi.

Student Name:	
	SYOD agreement and applicable policies and guidelines. I further the loss of my network and/or device privileges, and possibly other
Student Signature	Date
guidelines. I have read and discussed this	ny child will be responsible for abiding by the above policy and s with them and they understand the responsibility they have event that they violate this agreement, the district may ken appropriate action.
Parent/Guardian Signature	Date

FORM #10 - REGULAR USE PERMISSION FORM

Class/Grade/Teacher(s): Grades 9-12 - All Classes/Teachers School Names: St. James CHS, Bishop Macdonell CHS, OLOL Mode of Transportation: Walking Site(s) to be visited: All community sites within walking distance of St. James CHS, Bishop Macdonell CHS, OLOL This/These site(s) is/are to be used on a regular basis throughout the school year. Type of Activity Involved: Walking to community sites to support course curriculum and class instruction Dates of Use: While enroled into Wellington Catholic District School Board's International Program. Departure Time(s): Between 9:00 am -5:00 pm Return Time(s): Between 9:00 am -5:00 pm Other pertinent information: (hats, sunscreen, water, raingear, snow-gear, etc. required for the activity): Students should always be prepared to learn outside; weather appropriate items should be brought to school daily Students are expected to behave in the same manner as they would if they were in school during a regular school day. The School Board's Code of Conduct, school regulations, behaviour policies, etc. shall apply for the duration of these activities. Elements of Risk: Educational activity programs, such as those listed above involve certain elements of risk. Injuries may occur while participating in these activities. The following list includes, but is not limited to, examples of the types of injury which may result: 1. Slips, trips, and falls Exposure to weather conditions and allergens Collision with natural or man-made objects or other persons VERBAL CONSENT WILL NOT BE CONSIDERED AS CONSENT FOR THE ACTIVITY Acknowledgement: We have read the above. We understand that in participating in these activities, we are assuming the risks associated with doing so.

The risk of sustaining these types of injuries result from the nature of the activity and can occur without any fault on either the part of the student, or the Wellington Catholic District School Board (the "Board") or its employees or agents, or the facility where the activity is taking place. By choosing to participate in the activity you are aware of the potential risk of an injury occurring. The chance of an injury occurring can be reduced by carefully following instructions at all times while engaged in the activity. If you choose to allow your son/daughter to participate, you must understand that by signing this form, you are aware of the possible risks and that an injury might occur. The Board does not provide accidental death, disability, dismemberment or medical expense insurance on behalf of the students participating in this activity. Student accident insurance is available all year, not just at the beginning of the school year. Parents can go to www.insuremykids.com to purchase insurance.

Permission: I give permission for my child

Termission: I give permission for my child	(Name) to take part in
supervised activities at the above-named location(s) while enroled into Wellington Ca	atholic District School Boards International Program.
Name of Parent/Guardian:	_Date:
Signature of Parent/Guardian:	

(Name) to take nart in

The legal authority for the collection of this information is in the Education Act R.S.O. 1980. The purpose is to obtain Parental/Guardian consent for the impending trip. Users of this information will be the Principal/Vice Principal, appropriate volunteers, school support staff, Superintendent of Education and administrative support staff. This form will be retained for one year from the return date of the trip. The contact person for queries concerning this information is the Principal.

Acknowledgement Form

Please sign and return the following:

- WC Registration Form
- Acknowledgement Form
- Forms #7-11

A. READ ON	LY- Forms #1-5 (please	check as read)	
Form #1	Uniform Information		
Form #2	Attendance Informat	ion	
Form #3	Locker Information		
Form #4	Accessing Student En	nail at Wellington CDSB	
Form #5	School Cash Online I	nformation	
B. SIGN and	RETURN- Forms #6-11		
Form #6	Pupil Transportation	- Student Code of Conduct	
Form #7	Student Use of Tech	nology	
Form #8	Assistance with Med	lical Care	
Form #9	Bring Your Own Dev	ice	
Form #10	Regular Use Permiss	ion Form	
Form #11	Student Immunization	on Record	
included in Fo	· •	dging that you have read and agr and completed Forms #6-11.	eed to the terms
SIGNATURE C	F STUDENT:	D <i>A</i>	ATE:
NAMES OF PA	ARENT(S)/LEGAL GUAR	DIAN(S):	
(PLEASE PRINT FO		(SIGNATURE)	(DATE)
(PLEASE PRINT FI		(SIGNATURE)	(DATE)