

Student Registration Form Checklist

This form must be completed by a parent or legal guardian.

Complete the Student Registration form and bring it to Central Registration at
2121 Lonsdale Avenue, North Vancouver, along with the required **original** documents listed below.

Documents required for all student registrations:

Please bring originals - Central Registration staff will make copies

1. **Child's original birth certificate**
 - Ideally, showing parent names, with certified translation in English, if applicable
2. **Proof of Status in Canada both parents and children.**
 - **Canadian Citizens** – Canadian Birth Certificate, Canadian Passport or Citizenship Card/ Certificate, Certificate of Indian Status Identification Card
 - **Permanent Residents** - Permanent Residence Card (both sides) or Confirmation of Permanent Residence Document (valid landing document) and passports
 - **Work Permit** - Parent's Work Permit, accompanying parent & child's Study or Visitor Record Permit, parent's Letter/Offer of Employment **and** passports
 - **Study Permit** - Parent's Study Permit, accompanying parent & child's Study or Visitor Record Permit, Letter of Acceptance from school program/admission letter, and proof of tuition payment, course timetable/schedule **and** passports
 - Refugee Claimant Document(s) and copy of passport
 - Diplomatic Card and passports
3. **Legal documentation involving guardianship** - separation, divorce, guardianship orders, adoption orders, etc.
4. **Proof of address in BC**
(current address determines catchment, pre-sale agreements are not considered)

Accepted documents are:

 - a. Current utility statement: BC Hydro, gas, landline telephone, or internet/cable statement. If you receive these online, please print your most recent statement
 - b. If you have just purchased a home, please provide your purchase agreement with subjects removed
 - c. If all utilities are included in your rental agreement, please provide a copy of your rental/ lease agreement **and** a current BC Hydro, gas, landline telephone, or internet/cable statement in the landlord's/homeowner's name as per the lease tenancy/agreement
Please note: If you do not have a formal tenancy agreement (e.g., living with family/friend), we require:
 - Letter from the tenant/homeowner stating this living arrangement including the names of all your family members (children & parents) living in their residence, **and**
 - Proof of their address (as per accepted documents above)
5. **School Reports**, with certified translation in English, if applicable
 - Elementary School (grades 1-7): Report cards from the most recent school year
 - Secondary School (grades 8-12): Most recent report card (for grades 8 and 9) or, for older students, report cards from Grade 10 to current year
 - If applicable, any Individual Education Plan (IEP), Psych Ed reports, or medical reports

Student Registration Form

English K Fr Immersion K English (Gr 1-12) Fr Immersion (Gr 1-12) Late Fr Immersion (Gr 6/7 entry)

**This form must be submitted in person by a parent or legal guardian to
Central Registration, 2nd Floor, 2121 Lonsdale Avenue, North Vancouver, BC V7M 2K6
Please refer to checklist for original documents required for registration**

North Van Catchment Area School	1st School/Program Request	2nd School/Program Request

Student Information *Please Print*

Entering School Year (YYYY-YYYY) : Entering Grade

LEGAL Last Name	LEGAL First Name	LEGAL Middle Name(s)
<input type="text"/>	<input type="text"/>	<input type="text"/>

Usual Last Name	Usual First Name	Usual Middle Name(s)
<input type="text"/>	<input type="text"/>	<input type="text"/>

Gender: Birthdate (DD/MMM/YYYY):

Apt #	Address	City	Postal Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Name of Previous School	City	Province	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Has the student ever previously attended a school in British Columbia? Yes No

If yes, please list name of school(s): School Year(s) attended:

Inclusive Education: IEP / SPED Speech/Lang. OT / PT NSCDP

Language Spoken at Home: ELL

Medical Alerts: Anaphylaxis (Extreme Allergic Reaction) Diabetes Seizure Disorder

Severe Asthma Blood Clotting Disorder Serious Heart Condition

Special Needs (with potentially life threatening condition)

Doctor Name	Doctor Phone	Care Card #
<input type="text"/>	<input type="text"/>	<input type="text"/>

Indigenous Ancestry

Yes No If Yes, Status: Off Reserve Metis Non Status Band Of Residence:

Citizenship Status

Country of Birth	Citizen of	<input type="radio"/> Canadian Citizen <input type="radio"/> Exchange Student
<input type="text"/>	<input type="text"/>	<input type="radio"/> Permanent Resident/Landed Immigrant <input type="radio"/> Refugee
		<input type="radio"/> Study/Visitor Permit

Sibling Information (school aged)

Sibling 1 - Last Name	First Name	Birthdate (DD/MMM/YYYY)
<input type="text"/>	<input type="text"/>	<input type="text"/>

Current School/Program:	School Year:	Grade:
<input type="text"/>	<input type="text"/>	<input type="text"/>

Sibling 2 - Last Name	First Name	Birthdate (DD/MMM/YYYY)
<input type="text"/>	<input type="text"/>	<input type="text"/>

Current School/Program:	School Year:	Grade:
<input type="text"/>	<input type="text"/>	<input type="text"/>

Student Registration Form

Parent/Guardian Information

Student Lives With: Both Parents Mother Only Father Only Legal Guardian Other:

Parent/Guardian 1		Relationship to Student: <input type="text"/>
Last Name <input type="text"/>	First Name <input type="text"/>	Address (if different from Parent/Guardian 2) <input type="text"/>

Email Address <input type="text"/>	Home Phone <input type="text"/>	Work Phone <input type="text"/>	Cell Phone <input type="text"/>
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Citizenship Status: Canadian Citizen Permanent Resident/Landed Immigrant Refugee
 Work Permit Study Permit Visitor Record Permit

Parent/Guardian 2		Relationship to Student: <input type="text"/>
Last Name <input type="text"/>	First Name <input type="text"/>	Address (if different from Parent/Guardian 1) <input type="text"/>

Email Address <input type="text"/>	Home Phone <input type="text"/>	Work Phone <input type="text"/>	Cell Phone <input type="text"/>
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Citizenship Status: Canadian Citizen Permanent Resident/Landed Immigrant Refugee
 Work Permit Study Permit Visitor Record Permit

Alternate Contact Information (if Parent/Guardian cannot be reached)

Contact 1 - Last Name <input type="text"/>	First Name <input type="text"/>	Relationship to Student <input type="text"/>
Home Phone <input type="text"/>	Work Phone <input type="text"/>	Cell Phone <input type="text"/>

Contact 2 - Last Name <input type="text"/>	First Name <input type="text"/>	Relationship to Student <input type="text"/>
Home Phone <input type="text"/>	Work Phone <input type="text"/>	Cell Phone <input type="text"/>

Applicant's Declaration and Agreement

The information on this form is collected under the authority of the *School Act*. The information provided will be used for educational programs and administrative purposes, and when required may be provided to health services, social services or support services as outlined in the *School Act*. The information collected on this form will be protected consistent with the *Freedom of Information and Protection of Privacy Act*. If you have any questions about the information recorded on this form, please contact the District Principal, Administrative Services.

I certify that the above information is correct and valid of this date. I understand that the provision of false information may lead to my child no longer being able to attend the assigned school.

Parent/Guardian Name - Please Print <input type="text"/>	Parent/Guardian Signature <input type="text"/>	Date (DD/MMM/YYYY) <input type="text"/>
Parent/Guardian Name - Please Print <input type="text"/>	Parent/Guardian Signature <input type="text"/>	Date (DD/MMM/YYYY) <input type="text"/>

Information & Documentation - For Office Use Only

Student:	Parent/Guardian:
<input type="checkbox"/> Proof of Citizenship/Immigration Status	<input type="checkbox"/> Proof of Citizenship/Immigration Status
<input type="checkbox"/> Fee paying Int'l Student (previously)	<input type="checkbox"/> Proof of Residency <input type="checkbox"/> Parent Declaration Signed
<input type="checkbox"/> Proof of Age: <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Passport <input type="checkbox"/> _____	<input type="checkbox"/> Legal Court Order <input type="checkbox"/> 2nd Parent/Guardian Consent
<input type="checkbox"/> Report Cards/IEP/Evaluation/Medical Documents	<input type="checkbox"/> Parents Work Permit Expiry Date(DD/MMM/YYYY): _____
<input type="checkbox"/> English Language Assessment Required <input type="checkbox"/> Booked	<input type="checkbox"/> Parents Study Permit Expiry Date(DD/MMM/YYYY): _____

Received By: <input type="text"/>	Date (DD/MMM/YYYY): <input type="text"/>
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