

# 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** - passports **and** valid Permanent Residence Card or Confirmation of Permanent Residence Document (valid landing document)
  - **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 **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:

  - **Home Owners:**
    1. Current BC Hydro, gas, landline telephone, or internet/cable statement
    2. Purchase agreement, if you have bought a new home with subjects removed,
  - **Renters:**
    - Formal rental or lease agreement **and a current BC Hydro**, gas, landline telephone, or internet/cable statement in the tenant's or landlord/ homeowner's name (as per 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 Placement Request	2nd Placement Request
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

## Student Information Please Print

Entering School Year (YYYY-YYYY): <input style="width: 95%;" type="text"/>	Entering Grade: <input style="width: 95%;" type="text"/>
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LEGAL Last Name	LEGAL First Name	LEGAL Middle Name(s)
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Usual Last Name	Usual First Name	Usual Middle Name(s)
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

<input type="radio"/> Male <input type="radio"/> Female	Birthdate (DD/MMM/YYYY): <input style="width: 95%;" type="text"/>
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Apt #	Address	City	Postal Code
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Name of Previous School	City	Province	Country
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Has the student ever previously attended a school in British Columbia?	<input type="radio"/> Yes	<input type="radio"/> No
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If yes, please list name of school(s): <input style="width: 95%;" type="text"/>	School Year(s) attended: <input style="width: 95%;" type="text"/>
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**Inclusive Education:**    IEP / SPED    ELL    Speech/Lang.    OT / PT    NSCDP

Primary Language Spoken at Home:

**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 style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

### Aboriginal 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="radio"/> Permanent Resident/Landed Immigrant <input type="radio"/> Refugee <input type="radio"/> Study/Visitor Permit
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	

### Sibling Information (school aged)

Sibling 1 - Last Name	First Name	<input type="radio"/> Male <input type="radio"/> Female	Birthdate (DD/MMM/YYYY)
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>		<input style="width: 95%;" type="text"/>

Current School/Program: <input style="width: 95%;" type="text"/>	School Year: <input style="width: 95%;" type="text"/>	Grade: <input style="width: 95%;" type="text"/>
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Sibling 2 - Last Name	First Name	<input type="radio"/> Male <input type="radio"/> Female	Birthdate (DD/MMM/YYYY)
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>		<input style="width: 95%;" type="text"/>

Current School/Program: <input style="width: 95%;" type="text"/>	School Year: <input style="width: 95%;" type="text"/>	Grade: <input style="width: 95%;" type="text"/>
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# Student Registration Form

## Parent/Guardian Information

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

<b>Parent/Guardian 1</b>		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

<b>Parent/Guardian 2</b>		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"/>

<b>Parent/Guardian 2</b>		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)

<b>Contact 1</b> - Last Name <input type="text"/>	First Name <input type="text"/>	Relationship to Student <input type="text"/>
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Home Phone <input type="text"/>	Work Phone <input type="text"/>	Cell Phone <input type="text"/>
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<b>Contact 2</b> - Last Name <input type="text"/>	First Name <input type="text"/>	Relationship to Student <input type="text"/>
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Home Phone <input type="text"/>	Work Phone <input type="text"/>	Cell Phone <input type="text"/>
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## 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"/>
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Parent/Guardian Name - Please Print <input type="text"/>	Parent/Guardian Signature <input type="text"/>	Date (DD/MMM/YYYY) <input type="text"/>
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## Information & Documentation - For Office Use Only

### Student:

- Proof of Citizenship/Immigration Status
- Fee paying Int'l Student (previously)
- Proof of Age:  Birth Certificate  Passport  \_\_\_\_\_
- Report Cards/IEP/Evaluation/Medical Documents
- English Language Assessment Required  Booked

### Parent/Guardian:

- Proof of Citizenship/Immigration Status
- Proof of Residency  Parent Declaration Signed
- Legal Court Order  2nd Parent/Guardian Consent
- Parents Work Permit Expiry Date(DD/MMM/YYYY): \_\_\_\_\_
- Parents Study Permit Expiry Date(DD/MMM/YYYY): \_\_\_\_\_

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