

# □Student Registration Documentation Requirements

All families registering in a Winnipeg School Division School should bring the following
required documents to the school as part of the registration process.
<b>Proof of child's age and legal name (provide one of the following):</b>
Birth certificate or certificate of live birth

] Treaty card

Passport (along with proof that the birth certificate has been applied for)

Official letter from an assistance agency or receipt from Vital Statistics showing the application has been made

# **Proof of residency (provide one of the following):**

- Property tax assessment (for primary residence ONLY)
- Accepted offer to purchase
- Rental/lease agreement
- Child tax benefit statement with address (if rental agreement is unavailable)

# <u>Health insurance</u>

Manitoba heath card with your child's 9 digit number listed or a receipt from Vital

Statistics showing the application has been made

Out of province medical card with proof Manitoba health has been applied

For refugees please see below

# Custody/Guardianship documents (if applicable)

Court order document signed by a judge

Child in Care form

Protection orders for anyone legally prohibited from being near the student

For alternative care arrangements please contact the Enrolment Section of the Winnipeg School Division

# Permanent residents (if applicable)

Confirmation of permanent residence document

Permanent resident card

# Refugees (if applicable)

Refugee protection claimant document

Acknowledgement of claim and notice to return for interview (issued within the last calendar year)

All refuges are covered under IFHP (Interim Federal Health Program). This will be listed on their immigration document

# <u>Report Card</u>

Most recent report card

Grade 10 -12 transcript (if documents are in a language other than English, you must provide the documents in the original language, as well as a certified/ notarized literal English translations).

The names listed in the Winnipeg School Division's student information system are what is listed on the student's final transcript. If the name on the student's transcript is not their legal name this can cause problems for the student in the future due to inaccurate documents.

Per the Public Schools Act residency is based on the legal guardian's primary residence. The Winnipeg School Division requires one of the documents listed on this form as proof of primary residence.

In the event of an emergency it is important that this information is correct so it can be given to medical professionals and there is no delay in your child's treatment.

Legal guardianship requires additional documentation from a court or agency.

All names on the required documents must be the same. If different, please provide legal documentation showing the name change.

If there is any change to your immigration status after registration, please inform the school.

If you are unable to provide the school the requested documents, please contact Grant Park High School at 204-452-3112.

WINNIPEG SCHOOL DIVISION	Entry Date: Day / Month / Year				
STUDENT APPLICATION FOR REGISTRATION & CONSENTS					
SCHOOL: GRANT PARK HIGH SCHOOL	Student #:				
GRADE: 8 ROOM: PROGRAM CODE:	MET #:				
RESIDENT: YES NO CATCHMENT: YES NO	Move - Effective Date:				
STUDENT INFORMATION					
Legal Names: Last Name					
First Name Middle Name	Name Known by				
Birthdate: Sex: Female 🗖 Male 🗖 Country 6					
Preferred gender (choose one if applicable): Trans Person D Two-Spirit	Gender non-conforming 🗖				
If not a Canadian Citizen, please indicate:	-				
Date Entered Canada: Visa Expiry Date:					
Permanent Resident Government Assisted Refugee Private Sponsor R					
***Languages spoken at home: English: Yes 🗆 No 🗖 Other Language					
	City/Town/Prov:				
STUDENT ADDRESS					
Apt. No./Street No./Street					
Postal Code Home Phone [	Unlisted Student Lives on Own: Yes 🗆 No 🗖				
PARENT/LEGAL GUARDIAN AND CONTACT INFORMATION					
Parent, Legal Guardian or Alternate Contact					
	irst Name				
Relationship to Student Student Lives with Yes	$\Box$ No $\Box$ / Student Also Lives with Yes $\Box$ No $\Box$				
Enter address and home phone if different from student					
Address City					
Home Phone Unlisted Work Phone	ext Cell				
Email Employer					
Parent, Legal Guardian or Alternate Contact					
Last Name F	irst Name				
Relationship to Student Student Lives with Yes	$\Box$ No $\Box$ / Student Also Lives with Yes $\Box$ No $\Box$				
Enter address and home phone if different from student					
Address City					
Home Phone Unlisted Work Phone					
Email Employer					
Parent, Legal Guardian or Alternate Contact					
	irst Name				
Relationship to Student Student Lives with Yes	$\Box$ No $\Box$ / Student Also Lives with Yes $\Box$ No $\Box$				
Enter address and home phone if different from student					
AddressCity					
Home Phone Unlisted Work Phone					
Email Employer					
<b>LEGAL CUSTODY</b> Please provide documentation as necessary					
Joint* I Mother Father Guardian A *Joint Custody refers to those parents who have legal custody agreement	gency 🛛 Other 🗖				
SIBLINGS Pre-School/School Age					
Name Birthdate Sex					
	Male □         Male □				
	] Male 🗆				

Providing this personal information is voluntary and optional. It is being collected in compliance with section 36(1)(b) of the Freedom of Information and Protection of Privacy and the Personal Health Information Act as it is necessary for and relates directly to the activity of Manitoba and school divisions to plan, deliver and improve programs. If you have any questions regarding the collection of personal information, please contact the school principal.

ADDITIONAL CONTACT INFORMATION					
Emergency Contact (if parent/guardian	cannot be reached)				
Last Name		First Name	e		
Relationship to Student		Student Li			
Home Phone	Unlisted	Work Phone	ext	Cell	
Medical Information					
MB (9 digit) Personal Health ID No:					
Health Concerns/Allergies:					
Additional Health Concerns	Please indicate (	$\checkmark$ ) all health care nee	ds that apply to	your child:	
🗖 Anaphylaxis: Life-tl	hreatening allergy	(child is prescribed a	n EpiPen) A lett	er and additional form will b	
provided					
🗖 Asthma: (administr	ration of medicati	on by inhalation) A le	tter and additio	nal form will be provided.	
Bleeding Disorder					
Cardiac Condition					
🗖 Clean Intermittent	Catheterization				
Diabetes: Type 1 o	r Type 2				
🗖 Gastrostomy Feedi	ng Care				
Osteogenesis Impe	erfecta (brittle bor	ne disease)			
Ostomy Care					
Pre-set Oxygen					
Seizure Disorder					
Steroid Dependent	Condition				
Suctioning (oral an	d/or nasal)				
My child is receiving	Winnipeg School	Division transportation	on to and from s	chool.	
My child does not have any	/ of the above list	ed health care concer	ns.		
If you have checked any of the above health	care needs, the scho	ol will provide you with a	Unified Referral and	Intake System (URIS) Application.	

If you have checked any of the above health care needs, the school will provide you with a Unified Referral and Intake System (URIS) Application. The URIS application will then be submitted to the Winnipeg Regional Health Association (WRHA) URIS nurse to ensure the appropriate services will be provided and an individual health care plan put in place as needed.

## Application for the Use of the Online Information Resources in the Winnipeg School Division

**To the Student:** I understand and abide by the Division Policies, and applicable legislation for the responsible use of technology (Division/personal devices) and social media applications including use of the Winnipeg School Division networks. *To student 16 years and older please initial* \_\_\_\_\_\_

**To the Parent:** As the parent/guardian of the student, I understand that access is designed for educational purposes as set out by the Winnipeg School Division policies and applicable legislation. I hereby give permission to my child to have access to all technologies and Division approved social media within the Winnipeg School Division.

 $\square$  I consent to allowing my child to have access to all technologies and social media

 $\square$  I do not consent to allowing my child to have access to all technologies and social media

## Ancestral / Cultural Identification and Languages Declaration (if Aboriginal continue on next page)

Providing this personal ancestral/cultural information is voluntary and optional.

What is the student's ancestral or cultural identity, (for example, Chinese, Swazi, Filipino, etc.): \_\_\_\_

# SIGNATURE OF PARENT/GUARDIAN OR ADULT STUDENT:

DATE:



# **Aboriginal Identity Declaration EIS Data Collection**

#### Aboriginal Identity Declaration helps to support the efforts of Manitoba Education and Training and school divisions to plan and improve programs in a way that is responsive to Aboriginal learners.

(Providing this personal information is voluntary and optional. It is being collected in compliance with section 36(1)(b) of The Freedom of Information and Protection of Privacy Act as it is necessary for and relates directly to the activity of Manitoba and school divisions to plan, deliver and improve programs.)

Student Name:

1.	<ul> <li>I, (name of parent/guardian, please print clearly):</li> <li>Am submitting my child's Aboriginal Identity Declaration for the first time.</li> <li>Am making changes to my child's Aboriginal Identity Declaration.</li> <li>Already submitted my child's Aboriginal Identity Declaration and have no further changes to make at this time.</li> </ul>
2.	Is your child an Aboriginal person, that is, First Nation (North American Indian), Métis, or Inuk (Inuit)? Note: First Nations (North American Indian) include Status and Non-Status Indians If "Yes", mark the square(s) that best describe(s) your child now: Yes, First Nation (North American Indian) Yes, Métis Yes, Inuk (Inuit)
3.	Which best describes your child's Aboriginal cultural-linguistic identity? Please select up to two choices:   Anishinaabe (Ojibway/Saulteaux)   Dene (Sayisi)   Oji-Cree   Inuktitut   Ininiw   Dakota   Michif   Other – please specify:

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

#### **Informed Consent-Students**

Attention Parents/Guardians/Adult Students: Please complete and return this form to the school as soon as possible. This information will be kept on file for reference throughout the school year.

Student Name:

School: GRANT PARK HIGH SCHOOL

#### 1. Publish or Display Student Work

Our school would like to share information and communicate with parents/guardians by highlighting the school, students and student work or activities in a variety of publications and/or Division organized or sponsored event. The following are examples only and not meant to be an inclusive list of how student information and work may be published or shown:

- students and their displays during school sponsored open houses, professional development sessions;
- students in other school related activities held at the school, school division sites or at school or school division sponsored events;
- division publications, or school publications, which are posted to the school or Winnipeg School Division controlled website;
- or posting or publishing on the school or Winnipeg School Division controlled social media platforms.

Please note: Video and photographs of students posted to the school or Winnipeg School Division controlled websites and Winnipeg School Division controlled social media platforms may identify students by name.

#### Please indicate your choice below:

□ I GIVE CONSENT to Winnipeg School Division to publish or show my child's, or my (as an adult student) photographs, name, grade, school and samples of my or my child's work in various publications, at a Winnipeg School Division organized or sponsored events, and/or on Winnipeg School Division websites and social media platforms. I understand that photographs of students posted to the school or Winnipeg School Division controlled websites and social media platforms may identify students by name.

□ I DO NOT GIVE CONSENT to Winnipeg School Division to publish or show my child's, or my (as an adult student) photographs, name, grade, school and samples of my or my child's work in various publications and/or Division organized or sponsored events.

#### 2. Media

Many positive things take place in our schools and we would like to share this good news with the broader community by inviting journalists and other members of the media to visit our schools. Photographs, videotaping or interviews are allowed at schools only with **the** permission **of** the **principal or vice-principal**.

Please indicate your choice below:

□ I CONSENT to my child (or myself as an adult student) being photographed, videotaped/recorded or interviewed by the media.

**I DO NOT CONSENT** to my child (or myself as an adult student) being photographed, videotaped/recorded or interviewed by the media.

#### 3. Emails

The electronic distribution of newsletters, school updates and announcements regarding division and school activities, including fundraising and promotions.

L I CONSENT to receive information in the form of newsletters, school updates and announcements regarding division and school activities, including fundraising and promotions.

L I DO NOT CONSENT to receive information in the form of newsletters, school updates and announcements regarding division and school activities, including fundraising and promotions.

Parent/Guardian or Adult name (please print): _	[	Date:	

Signature of Parent/Guardian or Adult Student:

Please note: Should circumstances change during the school year, you may change your consent at any time by contacting the school principal in writing.

## LIVE STREAMING STUDENT PERMISSION FORM

In Winnipeg School Division, Live Streaming refers to the broadcasting of live lessons in real time where students are present in the classroom as well as students learning from home.

Through this model teachers will be providing live streaming experiences both in real time or through a recording, which may be posted on the learning platform for other students to view.

Due to the special nature of live streaming activities, parents/guardians must consent to their child being photographed, videotaped, or recorded as part of the classroom learning activities. During live streaming lessons the webcam in your home should be positioned in such a way that it only captures your child's image when they are participating in the live streaming lesson.

□ I give my child permission, during this school year, to participate in live streaming activities on platforms such as Seesaw, Google Suite/Meets, and Microsoft Office 365/Teams to address curricular outcomes. In addition, I give permission for my child's voice and image to be transmitted and viewed for the purpose of learning activities in the classroom and home environment.

□ I do not give my child permission, during this school year, to participate in live streaming activities.

(please print clearly)

Parent or Guardian

(please print clearly)

Parent or Guardian Signature \_

Date \_\_\_\_\_



# GRANT PARK HIGH SCHOOL GRADE 8 2024 – 2025 APPLICATION DUE: March 5, 2024

(Please Print)

Name

(Last Name)		t Name)	(First Name)	(Middle Name)
SCH	OOL ATTENDE	D IN 2023-2024		
Five	core area su	bjects: English Lang	uage Arts, Mathematics, Phys. Ed/Hea	lth, Science, and Social Studies
Prac	ctical Arts – Si	udents will rotate thro	ugh three of the following options. Ran	k order of preference (1 through 6)
c	lothing & Textiles	S Family Studies	Graphics Arts Manufacturin	g Metalworking Woodworking
Art, See	the brief descrip	tions below.	<b>rts</b> – Please rank your choice in order o o choices <b>where possible</b> . Not all cho	
	Art		e fundamentals of, and develop skills ir cs, and wire sculpture.	n, drawing, painting, mask making,
	Band	and attend rehearsal	play a woodwind or brass instrument a s/concerts. (\$30 instrument fee/year) eady play any musical instruments? No	
	French	Students will develop Francophone culture	o language skills, communication skills,	and an appreciation of the
	Performing Arts		o skills in three areas relevant to theatric opportunities to gain proficiency and co	

Does your child currently require any additional programming or support services? (specialized equipment, resource support, paraprofessional assistance, clinical support services, etc.)

□ No □ Yes, please explain: \_\_\_\_\_

## TWO PROGRAMS OFFERED AT THE GRADE 8 LEVEL:

**GENERAL PROGRAM:** A continuation of the Manitoba Curricula along the K-12 continuum, students are provided with many opportunities to explore the curricula through the use of hands-on activities, group work, field trips, experiments and more.

**ADVANCED PROGRAM:** This program focuses on exploring the core curricula in greater depth and at an accelerated pace with an emphasis on critical thinking and analysis. An Advanced Program application, student contract, parent checklist, and teacher recommendation are required to determine if the program is the right learning style for your child.

## Please circle the program(s) to which your child wishes to apply:

General Program or Advanced Program

Note: For detailed descriptions of all courses and other information, see our handbook online at www.winnipegsd.ca/schools/grantpark under the "Academic and Classes tab".