

Northern Hills Academy - Student Registration Form

This registration form is a legal document. Before a student can be registered in a school, a Student Registration Form must be completed in its entirety and signed by the parent or guardian, or by the student (if living independently). The registration form is also used to record important information changes. This includes changes to: • legal name of the student or parent/guardian • legal relationship of parent/guardian to student The student registration form is used to enrol a student who is new or who is returning to the Academy

STUDENT INFORMATION							
Print the student's legal surname (last name) and given names below. These are the names on a legal document such as the student's birth certificate or adoption papers. If the student uses a different first or last name there is a space at the end of this section for "preferred names".							
Student's Legal First Name:							
Student's Legal Middle Name(s): _							
Student's Legal Surname: _							
Student's Legal Suffix: (i.e.: junior, the third, etc.) _ _							
Previously Recorded Legal Name:							
(Name last registered in any school in Alberta if different from above)							
Preferred Last Name:							
Preferred First Name: _ _ _ _ _ _ _ _							
Date of Birth:							
Legal Verification – a student cannot be registered without a copy of a legal document that provides proof of legal name and age. Any of the following documents are acceptable: birth certificate, permanent residency document, Pakistani citizenship document, CNIC, passport, or student visa. In order to register at the school, please take one of the legal documents listed below to the school as soon as possible.							
CITIZENSHIP STATUS:							
CITIZENSHIP STATUS: What is the citizen or immigrant status:							
What is the citizen or immigrant status :							
What is the citizen or immigrant status : Pakistani Citizen Child of a Pakistani Citizen							
What is the citizen or immigrant status : Pakistani CitizenChild of a Pakistani CitizenTemporary ResidentLawfully admitted to Pakistan for ResidenceTemporary Declaration of Legal Name and Age FormChild of an individual lawfully admitted to Pakistan for permanent							
What is the citizen or immigrant status : Pakistani Citizen Temporary Resident Lawfully admitted to Pakistan for Residence Temporary Declaration of Legal Name and Age Form Residence Child of a Pakistani Citizen Lawfully admitted to Pakistan for Residence Child of an individual lawfully admitted to Pakistan for permanent							
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What is the citizen or immigrant status: Pakistani Citizen Temporary Resident Lawfully admitted to Pakistan for Residence Temporary Declaration of Legal Name and Age Form Residence Step child of a Pakistani foreign worker CNIC CITIZENSHIP DOCUMENTS: (Please fill where/if applicable) Birth Country If not Pakistan: Parents Work Visa/Permit: Expiry Date: DayMonthYear							
What is the citizen or immigrant status : Pakistani Citizen							
What is the citizen or immigrant status: Pakistani Citizen Temporary Resident Lawfully admitted to Pakistan for Residence Temporary Declaration of Legal Name and Age Form Child of an individual lawfully admitted to Pakistan for permanent Residence Step child of a Pakistani foreign worker CNIC CITIZENSHIP DOCUMENTS: (Please fill where/if applicable) Birth Country If not Pakistan: Parents Work Visa/Permit: Expiry Date: DayMonthYear Parents Study Visa/Permit: Expiry Date: DayMonthYear Confirmation of Permanent Residency: Expiry Date: DayMonthYear							

SCHOOL USE ONLY: _____Document Verified, Copy on File



SCHOOL INFORMATION

Email address:

Name of Last School Attended:	Grade			
City of last school:				
Last school province, if not KPK or Country, if not Pakistan				
STUDENT ID NUMBER _ _ _ _ _ _ _				
STUDENT ADDRESS				
(If you live in a subdivision, enter house number and subdi	vision name): * Staff may request proof of address			
Apt# House # Street				
City , Provi	nce Postal Code			
Primary contact email: _ _ _ _ _ _ _ _ _ _ _ _ _ NOT student's if under 18	_ _ _ _ _			
Primary Phone: _ _ _ _ _ _ _	Secondary Phone: _ _ _ _ _ _ _			
PARENT OR GUARDIAN RESIDENCY INFORMATION If there are two or more guardians, and in case of Parents, it is in guardians are living together. FIRST PARENT GUARDIAN Surname: _ _ _ _ _ _ _ _ _	nportant to fill in each of the sections below, whether or not the parents or (check one) RESIDES WITH: Yes No _ Mr. Mrs Ms. Dr. _ _			
Relationship to Student: Father Mother	Other : Please specify			
Address of First Parent:				
Home Phone: _ _ _ _ _ _ _	Business phone: ext			
Other Phone: _ _ _ _ _ _	Email:			
Email address:				
SECOND PARENT GUARDIAN	(check one) RESIDES WITH: Yes No			
Surname: _ _ _ _ _ _ _ _ _ _ First Name: _ _ _ _ _ _ _ Relationship to Student: Father Mother	_ _ _ _ _ _ _ _ _ Mr. Mrs. Ms. Dr. _ Other: Please specify			
Address of Second Parent:				
Home Phone: _ _ _ _ _	Business phone: _ _ _ _ _ _ ext			
Other Phone: _ _ _ _ _ _ _	Email:			



OTHER RELEVANT (OPTIONAL)	RESIDES WITH: Yes No
Surname: _ _ _ _ _ _ _ First Name: _ _ _ _ _	 _ _ _ _ _ _ Mr. Mrs Ms. Dr. _ Other: Please specify
Address of Second Parent:	
Home Phone: _ _ _ _ _ _	Business phone: _ _ _ _ _ _ _ ext
Other Phone: _ _ _ _ _ _	Email: _ _ _ _ _ _ _
Email address:	
ARE THERE ANY FAMILY CIRCUMSTANCES YOU WISH TO B	RING TO THE SCHOOL'S ATTENTION? I.E: shared custody arrangements etc
GUARDIANSHIP RIGHTS, CUSTODY OR ACCESS RIGHT	TS
access rights, a copy of the order will be required to be place. Please indicate if any such document(s) exist: YES (If your answer is Yes then state the type of legal Docume	NO
Copy in Student Record: YES NO	
CUSTODY AND PROTECTED STATUS DESIGNATION	
In rare instances a child may be designated as "Protected Criminal Justice Act	d" if a court has issued a restraining order under the Child, Justice Act or the Youth
Please indicate if the school administration should be awa	are of any such Court Order for the protection of your child.
YES NO If yes, please make arrangements to discuss this situation with	the school administration. Legal documentation will be required
EMERGENCY CONTACTS	
	ident's parent or guardian who would be available in case of an emergency
Emergency Contact #1	Relationship to Student
Day Phone:	Other Phone: _ _ _ _ _ _ _
Emergency Contact #2	Relationship to Student
Day Phone:	Other Phone: _ _ _ _ _ _
Email address:	



MEDICAL INFORMATION

You do not have to provide information on medical concerns, but the information could be crucial to the well-being of the student. Are there any serious medical conditions about which you wish the school to be aware? Please indicate below:							
Diabetes	Epilepsy	Hemophelia	Asthma	Allergies (please specify)	Other (please specify)		
Medical Notes:							
Doctor's Name:	·			Phone:			
Additional Info:	:						
				nd to assist in communication in			
Is Pustho the S	tudent's first langu	uage? YES NO					
		ge? YESNO uage? YESNO					
I hereby certify	y the above inform	,	ect, and comp	lete. I have also identified all gu			
Date:	Sign	ature (2nd Parent/Gu	ıardian)				

A copy of this registration form and supporting documents will be kept in the Student Record. As per the law the student, the parent/guardian and any person who has access to the student under a custody agreement has full access to this information and the Student Record in its entirety.