
EARLY CHILDHOOD SERVICES REGISTRATION



Early Education Programs and Kindergarten

SCHOOL YEAR: 2020-2021



PROGRAM REQUIREMENTS

Kindergarten Programs – children must be five years of age on or before December 31, 2020.

Early Education Programs (for 3 & 4 year olds) – typically developing children must be at least 3 years of age as of September 30, 2020.

- ✚ Programming for 4 year olds is 4 half days per week. Program fees are \$185.00 per month.
- ✚ Programming for 3 year olds is 2 half days per week. Program fees are \$ 95.00 per month.

Alberta Education does not provide funding for Early Education programs, other than for children who have identified needs. Children who experience difficulties in speech, language, hearing, vision, behaviour, and/or motor skills, that meet Alberta Education requirements, may access early intervention programming within our early education classrooms as follows:

- ◆ Children identified with mild/moderate delays must be at least 4 years old by December 31, 2020.
- ◆ Children identified with severe delays must be at least 3 years old by December 31, 2020.
A current assessment indicating the child's identified area of need is necessary for program placement. Should a child meet the Alberta Education requirements, as well as the age requirements, they may access programming without monthly fees.
- ◆ Children whose primary language is not English must be 4 years old by December 31, 2020 in order to access ESL (English Second Language) supports. Families must participate in an ESL screening with the Early Education Program Learning Support Teacher in order to confirm access to ESL supports.

REGISTRATION REQUIREMENTS

Registration will be considered incomplete until the following documents have been received.

- ◆ Birth Certificate (please bring the original document to the school so that we may make a copy)
- ◆ Or one of the following: Adoption Certificate, Canadian Citizenship Certificate, Confirmation of Permanent Residence (COPR), or a valid Permanent Resident card.
- ◆ \$40.00 (cash) non-refundable registration fee (applies to Early Education Programs only)

Children Returning for a Second Year of Early Education Programming

- If your child is currently attending an Early Education Program in the Lethbridge School Division, and they will attend a second year of Early Education Programming, you may return this completed package to the school you wish your child to attend in the fall. We will endeavor to accommodate preferences for school sites and class times (morning or afternoon), but this will depend on numbers that register at each school site. A \$40 registration fee applies to all returning children in Early Education Programs.

Early Education Programs in North and South Lethbridge:

- If your child will be new to an Early Education Program in September 2020, please complete the attached package and return it to your preferred school starting February 3, 2020. Space is limited so registering as soon as possible (beginning February 3, 2020) is recommended.

Early Education Programs in West Lethbridge:

- If your child will be new to an Early Education Program in September 2020, please go to any one of the Lethbridge School Division Westside elementary schools (Mike Mountain Horse, Coalbanks, École Nicholas Sheran or Dr. Gerald B. Probe) and complete an “Expression of Interest” preference form during the month of February. You will be asked to rank your preference of location from first to fourth, as well as preference for morning or afternoon programming. Names will be drawn at the beginning of March to determine which children will attend Early Education Programs at each school site, based on preferences parents have indicated. Only one form per child will be considered across all the west side schools. Waitlists for programs, if needed, will be established through the lottery process. You will be notified in early March which program your child will attend, then you will follow up with formal registration at that school by March 27th. If registrations as a result of the lottery process are not completed by March 27th, any vacancies will be filled with children on the waitlist.

Kindergarten registration begins January 20, 2020

- Complete the attached package and return to your designated boundary school (unless you are accessing French immersion, faith-based, or Spanish bilingual programs). If you require assistance in determining your boundary school please consult the School Locator Package on the Lethbridge School Division [website](#).

Please advise the school if your child has an identified delay, which may require support, or if your child has had a recent assessment. If your child may have support needs, or if you are concerned about your child’s development, you may contact the Early Childhood Coordinator, Isabelle Plomp or the Program Unit Funding Consultant, Rochelle Neville.

| | |
|---|---|
| Isabelle Plomp Lethbridge School Division 433 – 15 th Street South Lethbridge AB T1J 2Z4 Phone: (403) 380-5291 Email: Isabelle.plomp@lethsd.ab.ca | Rochelle Neville Lethbridge School Division 433 – 15 th Street South Lethbridge AB T1J 2Z4 Phone: (403) 380-5387 Email: rochelle.neville@lethsd.ab.ca |
|---|---|

Welcome to École Nicholas Sheran School!

Please complete and return this booklet in its entirety to the office in order to register your child.

The school office can be reached at (403) 381-1244 should you have any questions or need assistance in completing the package.



Student's Name: _____

2020-21 Grade: EEP

Preference: 4 Day Morning 4 Day Afternoon
 2 Day Morning 2 Day Afternoon

Any medical conditions that the school should be aware of: _____

Procedures in the event of trouble with condition and/or allergic reaction: _____

Please list any medications that your child may carry with them or need to have stored at the school: (****If your child requires any medication to be administered at school, the Medication/Personal Care Request and Authorization Form must be completed and signed by both the parent and the physician. This includes Tylenol, cough syrups, inhalers, Epi-pens, etc. Please do not send any medications to school without having this form filled out and on file in the office).**)

Signature of Parent/Guardian/ Independent Student

Date

| | |
|--------------------------------------|---|
| School: École Nicholas Sheran | Program: EEP <input type="checkbox"/> 2 Day AM <input type="checkbox"/> 2 Day PM / <input type="checkbox"/> 4 Day AM <input type="checkbox"/> 4 Day PM |
|--------------------------------------|---|

| | | | | |
|--|--------------------------------------|--|---|---|
| Student's Legal Last Name: | | | | |
| Student's Legal First and Middle Name: | | | | |
| Preferred Last Name: | | | Preferred First Name: | |
| Student's Date of Birth: | Month: | Day: | Year: | |
| Gender: | Male <input type="checkbox"/> | Female <input type="checkbox"/> | Unknown <input type="checkbox"/> | Unspecified <input type="checkbox"/> |
| Student's Physical Address: | | | | |
| Address: | | City: | Province: | Postal Code: |
| Student's Mailing Address (if different than student's residence): | | | | |
| Address: | | City: | Province: | Postal Code: |
| Home Phone (with area code): | | | Other Phone (with area code): | |
| Siblings currently enrolled with Lethbridge School District No. 51: | | | | |
| Medical Information (i.e. medical conditions, allergies, etc.): | | | | |
| School History: | | | | |
| Name and location of previous school attended: _____ | | | | |
| Date last attended previous school: _____ | | | | |
| Last Grade Completed: _____ | | | | |

| Parent/Guardian Contact 1 | Parent/Guardian Contact 2 | Parent/Guardian Contact 3 |
|--|--|--|
| Name: | Name: | Name: |
| Address: | Address: | Address: |
| Relationship to Student: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Stepmother <input type="checkbox"/> Stepfather <input type="checkbox"/> Other _____ | Relationship to Student: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Stepmother <input type="checkbox"/> Stepfather <input type="checkbox"/> Other _____ | Relationship to Student: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Stepmother <input type="checkbox"/> Stepfather <input type="checkbox"/> Other _____ |
| Home Phone: | Home Phone: | Home Phone: |
| Work Phone: | Work Phone: | Work Phone: |
| Cell Phone: | Cell Phone: | Cell Phone: |
| E-Mail Address: | E-Mail Address: | E-Mail Address: |

| Emergency Contact 1 (not parent or guardian) | Emergency Contact 2 (not parent or guardian) | Emergency Contact 3 (not parent or guardian) |
|---|---|---|
| Name: | Name: | Name: |
| Address: | Address: | Address: |
| Relationship to student: | Relationship to student: | Relationship to student: |
| Home Phone: | Home Phone: | Home Phone: |
| Work Phone: | Work Phone: | Work Phone: |
| Cell Phone: | Cell Phone: | Cell Phone: |

Custody or Guardianship Information:

Student PRIMARILY lives with _____
e.g., Mother, Father, Legal Guardian, Stepmother, Stepfather, other (specify)

If a custody order or any other legal document governing the custody or guardianship of your child exists, a copy or the most recent custody document must be placed in the student record.

Name and date of most current legal document _____ Attach copy

NAME YYYY/MM/DD

****Please complete and sign both sides of the registration form.****

Citizenship: 1 Canadian Citizen 5 Study Permit 7 Temporary Resident
 2 Permanent/Landed immigrant 6 Child of Canadian Citizen 9 Child of individual lawfully admitted to Canada / Unknown

English as a Second Language (ESL) Eligibility *A student may be eligible for ESL support when the primary language spoken at home is a language other than English. ESL students can be born in Canada or in another country.*

Languages spoken at home: _____ Students first language spoken: _____
 Do you need assistance with interpretation? Yes No

Is Your Child of First Nation, Metis or Inuit (FNMI) Heritage?

Dear Parents:

In 2004, after consulting with Aboriginal representatives, Alberta Education introduced the Aboriginal Learner Data Collection Initiative. It was introduced to identify First Nation, Metis and Inuit (FNMI) students for the purpose of helping to improve education programs and achievement for FNMI learners. The information helps Alberta Education and our school district determine effectiveness of initiatives for FNMI students, target programs to address student needs, identify promising practices, and determine professional learning needs for teachers. It is important information needed to provide the best possible learning environment for our FNMI students.

You will notice a section on your child's registration form that invites you to indicate if your child is of Aboriginal heritage. This question appears on all student registration forms in school jurisdictions across the province. The choice for an Aboriginal learner to provide this information is voluntary. As part of our on-going commitment to develop programming that reaches all students and to better serve the needs of our FNMI students, we ask that if your child is of Aboriginal heritage you check the appropriate box.

We also encourage all parents to visit our website or call our schools to find out more about the excellent programs and services we offer to our FNMI students.

Sincerely,

John Chief Calf,

Coordinator of FNMI Education



Aboriginal Self Identification:

If you wish to declare that the student is Aboriginal, please select one.

First Nation of Residence: _____

First Nation (status)
 Metis

First Nation (non-status)
 Inuit

Student's Indian Registry Number: _____

For further information, please refer to: www.education.alberta.ca/system-supports/results-reporting or contact Alberta Education at 780.427.8501. If you have questions regarding the collection of student information by the school board, please call 403.380.5299.

Pursuant to Section 23 of the Canadian Charter of Rights and Freedoms: Citizens of Canada

- whose first language learned and still understood is French, or
- who have received their primary school instruction in Canada in French (this means instruction in a French only school, **not a French Immersion program**) have the right to have their children receive primary and secondary instruction in French; or
- of whom any child has received or is receiving primary or secondary instruction in French (this means instruction in a French only school, **not a French Immersion program**) in Canada, have the right to have all their children receive primary and secondary instruction in the same language.

According to this criteria, are you eligible to have your child educated in French? Yes No
 If yes, do you wish to exercise your right to have your child educated in French? Yes No

In Alberta, parents can only exercise this right by enrolling their child in a French first language (Francophone) program offered by a Francophone Regional authority.

I hereby certify that the foregoing information is true, correct and complete to the best of my knowledge and belief.

Signature: _____ Date: _____
 Parent/Guardian YYYY/MM/DD

Did you complete both pages of the registration form? Please double check! It is very important that all relevant fields have been filled out, the second page signed and dated, even if the information has not changed from last year.



Lethbridge School Division

2020 / 2021 Student Registration Package

Student's Name: _____

School: École Nicholas Sheran School

Grade: EEP

INSTRUCTIONS

1. Read the Freedom of Information and Protection of Privacy Act information and Normal School Information notifications sheet enclosed in this package and retain this document at home for your reference.
2. Complete or verify the Student Registration Form.
3. Read and complete the enclosed Consent Forms.
4. Return the completed registration package to the school.

Consent to receive Commercial Electronic Messages (CEM's)

On July 1, 2014 Canada's Anti-Spam Legislation (CASL) came into effect. As of this date, Lethbridge School Division cannot send any messages by any means of telecommunication including e-mail messages, text messages, instant messages and direct messages to social networking accounts, where one or more of the purposes of this message is to encourage participation in commercial activity, whether or not there is an expectation of profit, unless we have received express consent to send these messages.

Lethbridge School Division values the many learning opportunities, activities and mementos that enhance the educational experience that we provide to our students. Some of these opportunities include performances, field trips, travel, school clothing, student photos, yearbooks, hot lunches or similar school related activities. In order for Lethbridge School Division, our schools and school councils to communicate our programs, activities and special offers through electronic means, we require your consent.

By signing this document, I/we consent to receiving a commercial electronic message (CEM) from Lethbridge School Division, its schools, and school councils. Examples of these would include, but would not be limited to:

- Newsletters
- Offers to purchase goods and services such as
 - Apparel
 - Yearbooks
 - School Photos
 - Travel offers
 - Hot lunches
- Advertisements for school activities, events and programs for which there is a fee

Note that consent to receive CEM information may be withdrawn at any time by contacting the School or Lethbridge School Division.

I, _____ the parent/guardian/Independent Student give my consent to receive Commercial Electronic Messages (CEM's) from Lethbridge School Division, its schools and school councils. This consent will remain in effect until I expressly withdraw my consent by notifying the School or Lethbridge School Division.

Signature of Parent/Guardian/Independent Student

Date

Email address: _____

(Please print clearly)

CONSENTS FOR INFORMATION DISCLOSURE

Copyright Release

As part of a student's educational program, they may be recorded and taped; have their work displayed; have their work reproduced for non-profit, educational purposes. Their production(s)/work(s) may be shown at educational displays during open house, in-service sessions and other school-related activities at school or School Board sites, or at school or School Board sponsored displays in the community or used in a school publication.

_____ I give my consent to the information disclosures as described above.

_____ I do not give my consent to the information disclosures as described above.

I understand that this consent is valid for this current school year only.

| | | |
|------------|--|-------|
| _____ | _____ | _____ |
| Print Name | Signature of Parent/Guardian/ Independent Student | Date |

Media/Internet Consent

Lethbridge School Division enjoys and encourages an open and positive relationship with print (i.e. newspapers, magazines, etc.) and broadcast media (i.e. television, radio, etc.) as a means of promoting and reporting on school activities. In addition, schools are using the Internet (websites, web-based programs) to increase positive learning, sharing and recognition opportunities for staff and students.

By signing this section I/we consent to the disclosure of information for use by Media and/or School Division use for learning and/or celebration of learning purposes. Examples of these would include, but would not be limited to:

- Interviews for media or school publications (i.e. - school newsletters, etc.)
- Photograph of the student and posting of student's name
- Group and class photographs that include student and their name
- Class work (i.e. - art, stories, projects) done by student
- Awards, scholarships, prizes received by student
- Participation of Student in Extracurricular Activity (Athletics, clubs, fundraising efforts, music)
- Collaboration with other schools and classrooms using web-based programs such as Skype, YouTube, Twitter, etc.

Please mark one of the following to indicate your consent:

_____ I give consent to disclosures as described above.

_____ I do not give consent to the above disclosures.

_____ I give consent, with the following exceptions.

| | | |
|------------|--|-------|
| _____ | _____ | _____ |
| Print Name | Signature of Parent/Guardian/ Independent Student | Date |

Public Health

Alberta Education will share student demographic information with Alberta Health Services in the case of health emergencies, such as a disease outbreak.

Students NEW to the School

If you are registering as a new student, you must have the following accompany your registration package:

- a photocopy of your birth certificate (if you were born in Canada)
 - a photocopy of your Canadian citizenship status if you were not born in Canada
 - a copy of your most recent report card from last school attended
 - a copy of a document verifying your address
-

Important Freedom of Information for Parents

The personal information requested on this form as part of the school registration process is collected under the authority of Alberta's Freedom of Information and Protection of Privacy Act (FOIP), the *School Act* and its regulations, and the Canadian Charter of Rights and Freedoms, Section 23.

This information will be used for the establishment of a student record, determination of residency, for a school board's obligation to provide students with an education program that meets their needs, to provide a safe and secure school environment and other purposes that relate directly to and are necessary for an operating program or activity, including program placement, determination of eligibility and/or suitability for provincial or federal funding, contact and health related information in the event of problems or emergencies. Personal information may also be provided to the Minister of Education for the purpose of carrying out programs, activities, or policies under his/her administration (e.g. research, statistical analysis). This information will be treated in accordance with the privacy protection provisions of the *FOIP Act*.

Normal School Information Disclosure

Parents/Guardians Please Read Carefully

The Freedom of Information and Protection of Privacy Act requires that consent be obtained for the collection and use of personal information that is not authorized under the *School Act*. The Lethbridge School Division believes that the uses listed below are part of a vital, healthy and functioning school and participation of all students is important and encouraged.

- the use of a student's name, photo, comments in the school calendar, newsletter, yearbook, graduation book, or other school publication.
- the taking of individual, class, team or club photos for school purposes and the use of student photos for the issuance of identification passes (i.e., library, activity, transit/bus).
- the use of student names on artwork or other creative work or material of students displayed at school or School Board sites, provided the Copyright Release section of this form is signed.
- the use of student names in honour rolls, birthday recognition, and other such acknowledgements within the school or School Board.
- the publication of student names as part of graduation and award ceremonies.
- the use of student names and academic information necessary for determining eligibility or suitability for provincial, federal or other types of awards or scholarships in the event the Board applies on a student's behalf.
- the use of students' names, related contact information and telephone numbers for absenteeism verification.
- the taking of photos and/or videos of classroom activities, and their use by the media or other organizations where students are not identifiable (the accompanying *Media Consent Form* may provide consent for situations where individual students are identifiable or interviewed and the material will be used outside the school). Please note that photos and/or videos of school activities that are open to the general public may be taken and used for purposes within and outside of the school. The school may not be able to restrict such activity at public events.
- the circulation of personal information on a "need to know" basis for students who have severe, life threatening medical conditions or for students in emergency situations.
- the taking of photos/videos of classroom or other school activities by the School Board where the material will be used within the school. (Where individual students are identified or interviewed and the material will be used outside the school, a separate and specific consent will be required. You will be contacted prior to this event taking place.)

If you have concerns with any of these uses of information, please notify the school principal in writing.

Please retain this document at home for future reference.

Child's Name: _____

Date: _____

Additional Early Education Program Registration Information 2020-2021

Thank you for taking the time to provide us with the information on this sheet. It will help us a great deal in meeting the needs of your child as they begin their early education program.

Requirements of the program:

1. Your child must be a minimum of 3 years of age on September 30th of the school year they are registering in.
 2. Your child must be toilet trained* when the program begins. This means the child is no longer in pull ups or diapers. **Exceptions will be considered for children that have **identified developmental delays**.*
 3. Your registration form must be complete and include:
 - the child's birth certificate (or proof of order from government registry).....
 - all contact information requested within.....
 4. A non-refundable registration fee of \$40.00 (cash only) must be included with your registration.
 5. Monthly fees for both 2-day and 4-day registered children will be posted on School Cash Online in late August or early September. At that time, parents may choose to pay ahead or pay fees on the first day of each month. No cash or cheques will be accepted for the monthly payments. Payments will be made online using Visa, Mastercard or eCheque (out of a chequing or savings account).
- Monthly fees are
- \$185.00 per month for 4 half days per week of programming (4 year olds)
 - \$ 95.00 per month for 2 half days per week of programming (3 year olds)

| | | | | |
|----------------------------|---|-------------------|--|-------------------|
| Program Preference: | 4 years old by December 31, 2020 | | 3 years old by September 30, 2020 | |
| | 4 mornings ____ | 4 afternoons ____ | 2 mornings ____ | 2 afternoons ____ |

Has your child previously attended child care? _____ If so, where? _____

Has your child previously attended a preschool or early education program? _____ Location: _____

What are you child's strengths and interests?

Do you or any family members or friends have any concerns about your child's development or has your child ever received support, assessment or therapy in these areas? (e.g. speech and language, motor skills, behaviour, social/emotional, etc.)

Is there anything else you'd like us to know about your child? (learning, developmental, medical, social/emotional, etc.)

If your child has a birthdate between September 1 and December 31, please let us know if you intend on:

- One year of Early Education Two years of Early Education I need more info – please contact me