

Student Data Collection Form

Newcomer & International Student Pre-Registration for Admission to School

INSTRUCTIONS FOR COMPLETING REGISTRATION FORM

STUDENT INFORMATION	Please complete student information (as printed on passport). It is important to complete all information in the section, including the address of where the student will be living.
PARENT/GUARDIAN INFORMATION	Please complete the information of the parents, regardless of who the student will be living with. Mother's name before marriage is used to identify student in the event there is another student with the same name. It is not necessary to provide employer or telephone information if the parent is living in a different country but please leave an email, if available.
CUSTODIAN INFORMATION	Please complete information in the box if the student will not be living with a Parent/Guardian. If a student is 19 or under, they MUST have a Custodian. It is important to provide all information.
EMERGENCY CONTACT / AFTER SCHOOL INFORMATION / MEDICAL-HEALTH INFORMATION	Please complete as much as you can. Remainder of information will be completed as available.
SIBLINGS	If the student has siblings, please provide information.
STUDENT PROFILE	This information will help us to support student appropriately.
IMMIGRATION STATUS	What your status will be upon your arrival to the Greater Saint John area.
CONDITIONS AND AGREEMENT	Please go over this carefully with the student and sign/print as having read and agreed.

NOTE: If at any time any information on this form changes, <u>it is your responsibility</u> to inform the school and/or the Newcomer and International Student Center of these changes.

Complete as much information on the form as possible



	FOR OFFICE USE
SCHOOL:	
GRADE:	
START DATE:	

Student Data Collection Form

Newcomer & International Student Pre-Registration for Admission to School

This form is to provide information to the school for the registration of your child. Should this information change during the school year, please advise the **School** or the **Newcomer & International Student Welcome Center:**

Complete as much information on the form as possible

Complete and send electronically to Lynn.MacDonald@nbed.nb.ca

<u>OR</u>

mail to:

Lynn MacDonald Newcomer & International Student Coordinator Anglophone South School District 490 Woodward Avenue Saint John, NB, Canada, E2K 5N3

STUDENT INFORMATION (Please Print)											
Date of Entry to Canada OR Expected Date of Entry to Canada											
Student Last Name (as printed on Passport)First NameMiddle Name(s)Preferred Name											
Date of Birth (YY/MM/DD) Male Female Gender Independent											
NEW BRUNSWICK ADDRESS											
Street Address										Apt #	
City/Town/Village				Province						Postal Code	
MAILING ADDRES	S			·							
Same as Physical	Address	s 🗆 Yes	s [□ No (lf no	o, ple	ase comp	ete the ad	ddress i	nfor	rmation b	oelow)
Street Address										Apt #	
City/Town/Village					Pro	ovince/Sta	te				
Postal/Zip Code	Postal/Zip Code Country										
Language spoken often at home	most	Other Lang	guage(s) spoken	regul	larly		Coun	try	of Origin	

PARENT/GUARDIAN INFORMATION (Please Print)

MOTHER					
Origin of Birth					
Last Name		First Name		Last Name (befor	re marriage)
					• /
Employer			Email Address		
Phone (daytime)			Phone (other)		
You May Contact	le For:				
School Closure	Emergency	🗸 🗆 Can Pick Up	□ Parent/Gua	ardian 🗆 Mailing	gs 🛛 Lives With
MAILING ADDRES	S				
Same as Student Yes No (If no, please complete the address information below)					
Street Address					Apt #
City/Town/Village			Province/State		
Postal/Zip Code			Country		
FATHER	I				
Origin of Birth					
Last Name			First Name		
Employer			Email Address		
Phone (daytime)			Phone (other)		
You May Contact M	le For:				
School Closure	Emergency	🗸 🛛 Can Pick Up	Parent/Gua	ardian 🗆 Mailing	gs 🛛 Lives With
MAILING ADDRES	S				
Same as Student	🗆 Yes 🗆	No (If no, please co	omplete the addr	ess information be	elow)
Street Address					Apt #
City/Town/Village			Province		
Postal/Zip Code			Country		

Complete this section <u>ONLY</u> if the student will be living with a Custodian and not a Parent										
PARENT'S PERMANENT ADDRESS IN HOME COUNTRY										
Street Address		Apt #								
City/Town/Village	Province/State									
Postal/Zip Code			Country							
Phone (including	Country & City Codes)			Phone	(other)					
 The parents have appointed the following person as the LEGAL CUSTODIAN. I will provide <u>NOTARIZED</u> letters: One signed by the parent in their home country and One signed by the Legal Custodian in Canada confirming the appointment. A Legal Custodian must be a Canadian Citizen or a Permanent Resident. I understand that the student may not start school until he/she provides the School District with notarized letters: One signed by the Legal Custodian in Canada as well as Proof of Citizenship <u>OR</u> Permanent Residency of the Custodian. Custodian ship applications are available upon request. Custodian must also complete and submit a Custody Letter of Agreement, provided by the School District. 										
CUSTODIAN										
Last Name			First Nar	ne						
Street Address							Apt #			
City/Town/Village						Post	al Code			
Email			Phone							
HOMESTAY (if stu	dent not living with Cus	todian)								
Last Name First Name										
Email			Phone							

EMERGENCY CONTACT (Please Print) (This must be a person other than a parent)

Last Name			First Name						
Email Address	Email Address								
Phone (daytime)			Phone (other)						
You May Contact Me	You May Contact Me For:								
□ School Closure	□ Emergency	Can Pick Up	□ Parent/Guardian	Mailings	□ Lives With				

AFTER SCHOOL INFORMATION (Please Print)

□ Yes

Does this student go home after school?

□ No (If no, provide information below)

Name of	Caregiver	or after	school	program
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Street Address		Apt #	
City/Town/Village	Post	tal Code	
Phone (daytime)	Phone (other)		

MEDICAL/HEALTH INFORMATION (Please Print)							
New Brunswick Medicare # (if applicat	ole)	Expiry Date					
MEDICAL INSURANCE PURCHASED P	'RIVATELY*						
Name of Insurer							
Certificate/Policy #		Expiry Date					
*It is recommended you have private medical insurance if you do not have NB Medicare. Students living with a custodian <u>must</u> have proof of private medical insurance.							
Name of Doctor in NB	D	octor Phone #					
STUDENT MEDICAL CONDITIONS							
Does the student have any life-threate	ning conditions (e.g. risk of anaphy	lactic shock)?	□ Yes	🗆 No			
If yes, please describe							
If yes, has a plan been developed with If no, please ensure you communicate the	•••	tion?	□ Yes	🗆 No			
Does the student require an EpiPen?	□ Yes (if yes, please complete the provided of the provided o	ne EpiPen inform	nation below) 🗆 No			
Which EpiPen is required?	☐ Junior (33-65 lbs.)	lar (66 lbs. and m	nore)				
Does this student have any other med	ical concerns of which the school s	hould be aware?	P 🗆 Yes	🗆 No			
If yes, please describe							
Is there any other information you would like us to have that would help us improve service to this student? (e.g. special services received, other professionals/agencies which are serving this student, etc.)							

SIBLINGS INFORMATION (Please Print)

Siblings Name	Date of Birth	School Attending (if applicable)

STUDENT PROFILE (Please Print)

Student can read in their first language			🗆 No
Student can write in their first language			□ No
Student has had formal English Language instruction	☐ Yes. If yes, how many years?	?	🗆 No
Student has had formal French Language instruction	☐ Yes. If yes, how many years?	?	🗆 No
Student can speak English fluently		□ Yes	🗆 No
Student can speak French fluently			🗆 No
Student can write English fluently			🗆 No
Student's Parents/Custodian can speak English			🗆 No
COMPLETE ALL THAT ARE APPROPRIATE			
Last grade (K-12) student has completed			
Date student last attended school			
Did student study English?			🗆 No
IF STUDENT HAS NEVER BEEN IN SCHOOL			
Did student attend English preschool?	☐ Yes. If yes, how many years?	?	🗆 No
Did student attend preschool in home country?		□ Yes	🗆 No

IMMIGRATION STATUS UPON ARRIVAL IN NEW BRUNSWICK

Parents Please Complete

Are you a Canadian Citizen?	□ Yes □ No	
Are you a Provincial Nominee applicant?	🗆 Yes 🗆 No	
Are you a Permanent Resident?	Yes (If yes, provide a copy of the document)	🗆 No
Country of citizenship		
Do you have a work permit?	Yes (If yes, provide a copy of the document)	🗆 No
Do you have a University/College Study Permit?*	Yes (If yes, provide a copy of the document)	🗆 No
Does the student need a Student Study Permit?	Yes (See tuition and registration fees below)	🗆 No

*Please note if the parent has a Study Permit, a "Letter of Attendance" must be provided by the University or College, once their classes start.

THE SCHOOL YEAR	TUITION AND REGISTRATION FEES (for International Students) (in Canadian \$)
 School begins in September for all students. School ends in June for all students. High school students have two semesters: Semester 1: September – January Semester 2: February – June 	 \$250 non-refundable Registration Fee required IF APPLICABLE: 2020-2021 Tuition = \$15,100/year OR \$7,550/Semester

Anglophone South School District (ASD-S) will make the final decision about grade and school enrollment

CONDITIONS AND AGREEMENT

- 1. The student must obey the laws of Canada and the Province of New Brunswick, rules and policies of Anglophone South School District (ASD-S), Early Education and Childhood Development (EECD) and the school that they attend.
- 2. The student or custodian/legal guardian must immediately inform the school of any change in address, Homestay or Custodianship.
- 3. The student must maintain a **FULL-TIME** timetable.
- 4. ASD-S will place students in an age-appropriate grade level.
- 5. ASD-S will have the right to place the student in a school that serves the neighborhood in which the student lives.
- 6. ASD-S will have the sole discretion in placing students in courses that may include English as an Additional Language (EAL) as it deems appropriate.
- 7. ASD-S may require students to undergo a Language Placement test to determine the need for EAL support.
- 8. Participating in school and school activities may result in random pictures of the student for promotional purposes or to be used on district or school webpages. Let your school administration know if you do not grant permission for this.

I hereby certify that the above information is true and complete. I understand that any false or incomplete information submitted in support of my application may invalidate my application and result in the withdrawal by ASD-S of an offered school placement at any time during my registration. I agree to notify ASD-S if I wish to withdraw my application for acceptance and registration.

Parent/Custodian Signature: ____

Date of Application:

(YY/MM/DD)

WHAT WE DO WITH STUDENT RECORDS:

In order to support learning, the public education system keeps a variety of information about students. Some of this information is kept permanently. It provides a record should it ever be needed in the individual's lifetime. This information includes legal name, address, attendance, marks/grades, credits obtained, graduation status, transcript of marks, etc. Other types of information are also needed to provide a variety of services and supports to students. This second type of information is kept only as long as it is relevant to the services provided. It can include standardized assessments, student work samples, clinical findings, comments of teachers, or other professionals, health information, current disciplinary letters/interventions, appeal records, copies of probation and custody orders, etc. Medicare numbers are only used in emergency situations.

Use of student information falls into three categories:

- 1. To help educators and other professionals provide direct service to the student
- 2. For research and planning activities that improve education or improve services related to the overall
- student development
- 3. For administrative purposes.

If you have any questions regarding the use of personal information in the school system, please contact the Director of Schools at your appropriate Education Centre.

CUSTODY INFORMATION

PLEASE NOTE: Schools are required to provide, on request from non-custodial parents, information about a student's education, except where a court order prohibiting access of a parent to a child exists. If there is a current, valid court order prohibiting access to this child, the responsibility rests with the custodial parent to provide the school with a copy of this document. Please contact the school.

THE FOLLOWING DOCUMENTATION IS REQUIRED BEFORE A CHILD STARTS SCHOOL

REGISTRATIONS WITH AN INTERNATIONAL STUDENT STUDY VISA		REGISTRATIONS WITH PERMANENT RESIDENCE, PARENT WORK VISA, PARENT STUDY VISA		
	Signed registration form (must be submitted to receive a Letter of Acceptance with a non-refundable registration fee of \$250 (Canadian Dollars). Complete as much information as possible on the form. See payment information below.		Signed registration form (submitted when you have a permanent address).	
Appointment to be made when family/student arrive in the Greater Saint John area for completion of registration. The following will be required, <u>at that time</u> . Unless requested, please do not forward this information via email.		Appointment to be made when family/student arrive in the Greater Saint John area for completion of registration. The following will be required, <u>at that time</u> . Unless requested, please do not forward this information via email.		
	Student passport (proof of age)		Student passport (proof of age)	
	Student birth certificate		Student birth certificate	
	Proof of immunization records in English		Proof of immunization records in English	
	Student transcript (report card) in English		Student transcript (report card) in English	
	Study Permit issued by Immigration		Landing Papers (Parents & Student) issued by Immigration	
	Notarized Custodian agreement (if applicable)		Notarized Custodian agreement (if applicable)	
	Proof of Medical Insurance		Parent Letter of Attendance at University or College	
	Tuition fee in Canadian Dollars		(if applicable). If parent is on a Study Permit, a letter of attendance will be required from the University or College once the parent begins classes.	
TUITION FEE		PLEASE NOTE		
\$15,100.00 for September 2020 to June 2021 may be made in two installments of \$7550.00 in August 2020 and January 2021		If you require a Letter of Acceptance for your country, you must submit the registration form (<i>complete as much as possible</i>) and a non-refundable fee of \$250 (Canadian Dollars). See payment information below.		

PLEASE MAKE AN APPOINTMENT WITH

Lynn.MacDonald@nbed.nb.ca TO FINALIZE REGISTRATION

WHEN YOU ARRIVE IN NEW BRUNSWICK!

You may email Lynn.MacDonald@nbed.nb.ca OR

postal mail the registration form and registration fee (if applicable) to:

Lynn MacDonald

Newcomer & International Student Coordinator Anglophone South School District 490 Woodward Avenue Saint John, NB, Canada, E2K 5N3

PAYMENT INFORMATION

□ Make cheque or bank draft payable to **Minister of Finance**.

MAIL OR DELIVER CHEQUE TO: Lynn MacDonald Newcomer & International Student Coordinator Anglophone South School District 490 Woodward Avenue Saint John, NB, Canada, E2K 5N3

PLEASE NOTE: We do not accept credit cards or electronic transfers.