

Burnaby Mountain Secondary School

Parents/Guardians **MUST** accompany their child to the registration appointment and bring original documentation as indicated below. Documents will be photocopied to be included as part of the registration package.

> Proof of birthdate for the student:

- **❖** Birth certificate
- Passport

Proof of guardianship:

Parents/Guardians as shown on birth certificate or other appropriate legal documentation such as landed immigrant paper or guardianship order

Note: A notarized custodial guardian appointment is not the same as a guardianship order granted by the courts.

Proof of citizenship for both the parent and the student:

- Canadian birth certificate
- Citizenship card
- Passport
- Landed immigrant document
- Permanent resident card

Proof of residency of the parent/guardian and student:

(Must include two items with at least one item from Category A below)

Category A		Category B		
*	Proof of ownership of dwelling or long-term	*	BC Hydro bill	
	lease or rental of dwelling	*	BC telephone or cable bill	
*	Legal documents indicating BC residence	*	Provincial driver's license	
*	Parent/guardian filing income tax returns as a	*	Provincial registration of automobile	
	BC resident	*	Canadian bank accounts or credit cards	

Immunization records

Copy of student's most recent school marks (including summer school) such as:

- ❖ An official copy of marks from the student's Permanent Record Card
- Most recent report card
- * Transcript of academic record
- Transfer form with marks

The Registration Package will include:

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Completed Burnaby School District Student Information Form that includes emergency contacts available during school
hours and the name and phone number of the family doctor or medical clinic (2 pages)
Completed Burnaby School District Medical Information Form (1 page)
Note: Severe health concerns require additional forms and can be obtained from the school.
Completed Burnaby School District Student Digital Responsibility Guidelines with Student Acceptable Use Agreement
Form (2 pages)
Completed Burnaby School District Media Consent and Student Personal Information Consent Forms (2 pages)
Completed Burnaby School District Consent to Send Commercial Electronic Messages (1 page)
If applicable, completed Burnaby School District Continued Access to Indigenous Education Programs and Services (1
page)
Completed Notice of Withdrawal form (for current school) (1 page)





STUDENT INFORMATION FORM

SCHOOL DISTRICT 41	School				
MyEdBC #					
	Grade		Division		
	Student Info	rmation (please pri	nt)		
Gender □ MALE □ FEMALE		<u>`</u>			
LEGAL	LEGAL		LEGAL		
Last Name	First Nar		Middle Name		
USUAL	Preferre		Birthdate		
Last Name	First Nar	ne	(DD/MM/YY)		
Home Phone	Unlisted	? □ YES □ NO			
Address	Apt. #	City	Province Postal Code		
Name of Previous School		District	Prov/Country		
Has Student attended a Burnaby school of	or StrongStart Progra	m? □YES □NO	Name of School		
Identified Learning Needs/Special Needs	(diagnosis, Ministry	of Education Designation) □ YES □ NO		
Student currently has an Individualized E	ducation Plan (IEP)		☐ YES ☐ NO		
Country of Birth	Citizen o	f	First Language Spoken		
Language Spoken at Home					
Aboriginal Ancestry? ☐ YES ☐ NO	f yes, please specify:	☐ On Reserve ☐ Off R	Reserve		
For Office Use Only International Student – Funding Eligible International Student Funding Not Eligible					
	(work/study permit) (fee paying) ☐ Parents Work Permit - Expiry Date ☐ Parents Study Permit - Expiry Date				
			Crime Expiry Dute		
Par	ent/Guardian	Information (plea	ase print)		
Parent/Guardian 1					
Relationship to Student		Lives with student? \Box	YES □ NO Has custody? □ YES □ NO		
Citizenship Status: Canadian Citizen	☐ Permanent Resid	ent/Landed Immigrant	☐ Refugee/Claimant ☐ International		
LEGAL Last Name		LEGAL First Nam	e		
USUAL Last Name		USUAL First Nam	ne		
Address (if different from student)					
Home Phone Work		Cell	Email		
Parent/Guardian 2					
Relationship to Student		Lives with student?	I YES □ NO Has custody? □ YES □ NO		
Citizenship Status: Canadian Citizen	☐ Permanent Resid	ent/Landed Immigrant	☐ Refugee/Claimant ☐ International		
LEGAL Last Name		LEGAL First Nam	e		
USUAL Last Name		USUAL First Nam	ne		
Address (if different from student)					
Home Phone Work		Cell	Email		

For Office Use Only

Emergency Contact Information						
Emergency Contact 1 (if parents/guardians cannot be reached) Can pick up student? □ YES □ NO						
Last Name		First Name	Relationship to Student			
Home Phone Work		Cell	Language Spoken			
Emergency Contact 2 (if parents/gua	ardians cannot	be reached)	Can pick up student? ☐ YES ☐ NO			
Last Name		First Name	Relationship to Student			
Home Phone	Work	Cell	Language Spoken			
Out-of-Area Contact (sequence 88)						
Last Name		First Name	Relationship to Student			
Contact Phone		City/Country				
	Student	t Medical H	ealth Information			
Doctor (sequence 99)						
Doctor Name		Phone	Care Card #			
Special Medical Concerns? ☐ YES ☐	□ NO	If yes, please list details on the District Medical Information Forms				
Immunization Records – copies attac	ched?	□ YES □ NO				
Sibling Information	(only for siblin	gs attending scho	ols or StrongStart programs within the Burnaby School District)			
Sibling 1 Last Name		First Name	□ M □ F Birthdate			
Sibling 2 Last Name		First Name	☐ M ☐ F Birthdate			
Sibling 3 Last Name		First Name	□ M □ F Birthdate			
The information on this form is collected under the authority of the School Act, Sections 13 and 79. 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 Section 79 (2) of 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 School Administration.						
I certify that the information provid	ed on this forr	n is correct and v	alid of this date:			
Parent/Guardian Signature			Date			
Administrator's Signature Date			Date			
	nformation	and Documenta	tion – For Office Use Only			
☐ Cross District Transfer ☐ Proof of Residency ☐ Proof of Licensec ☐ District Language Program Applicant ☐ Copy of Legal Alert/Court Orders			☐ Proof of Citizenship/Immigration Status ☐ Proof of Age: ☐ Birth Certificate ☐ Passport ☐ Other ☐ Proof of Residency ☐ Proof of Licensed Childcare Address ☐ Copy of Legal Alert/Court Orders ☐ Medical Alert Forms completed (if applicable)			



STUDENT INFORMATION FORM

PARENT PLEASE COMPLETE:

- LEGAL Last Name:	PREFERRED Last Name:			
LEGAL First Name:	PREFERRED First Name:			
LEGAL Middle Name:	PEN #:			
Grade:	Birth Date: (YYYY/MM/DD)			
Gender: □ Male □ Female	Home Phone #			
<u> Home Address:</u>	<u>Last School Attended:</u>			
- Apt # House #	School Name;			
Street Name	Street Name			
- City	City			
Country:	Country:			
Postal Code	Postal Code			
	SE ONLY:			
Family Relationships:				
Strengths / Interests:				
Strengths / Interests.				
Achievement:				
Instructional Assistance Received				
(LAC, course support, etc.):				
Attendance:				
Behaviour:				
Legal Issues:				
	Probation: Charges Pending:			
Other Agencies Involved:				
Other Information:				
FORM COMPLETED BY:	DATE:			



PEN#

MEDICAL INFORMATION FORM

Must be completed for all medical conditions

Student Photo

A. STUDENT INFORMATION	□ Wears Medic Alert ID
Student Name	Birth Date: year/month/day
Parent/Guardian Name(s) and Contact Ph	none #
Parent/Guardian Business Phone #	Parent/Guardian Home Phone #
Emergency Contact Name/Phone #	Physician Name/Phone #
B. HEALTH Please indicate with a ✓ if your ch concerns, or requires medication t	ild has any of the following medical conditions or any other serious health to be administered at school.
□ Visual Impairment spec	ify: ify: ify:
 2. Serious Health Concerns Anaphylaxis Diabetes Asthma Seizure Disorders Other serious health concerns 	(parent required to fill out form A) Allergic to: (parent required to fill out form B) (parent required to fill out form C) (parent required to fill out form D) (parent required to fill out form E)
☐ My child requires medication to	r school staff to give students during school hours be administered by school staff (parent required to fill out form F) ILD'S HEALTH IN RELATION TO THE ABOVE CONDITIONS OCCUR, PLEASE
childhood immunizations that mos grade 6 and grade 9 students at Papillomavirus (HPV) vaccine will be A request for parental consent will	Id against certain communicable diseases. In addition to recommended st children have received, the following immunizations are provided for a school clinic: Hepatitis B, Meningococcal C and Chickenpox. Human offered to students in grade 6. be sent home prior to the school clinic. Following an immunization clinic at tice of immunization that can be added to medical records at home.
Parent/Guardian Signature	Date Completed
	Guardian(s) School Health Resource Binder (red binder) t Care Plan (if necessary) Student's Emergency Kit



District Technologies & Information Systems STUDENT ACCEPTABLE USE AGREEMENT

STUDENT NAME:	SCHOOL:	GRADE:
as a means to enhance their secure virtual classrooms, disc	es students with access to Digital Tech learning. Students have access to, am cussion boards, video files, digital pictur ncyclopaedias, wikis, blogs, texting, so	ongst other things, public websites, res, audio files, library systems,
•	caring physical and digital learning spa t students may see and do in digital ei Il risks.	
	es (see reverse) apply to all students u Burnaby School District. Students are e:	
	to District Technologies and Information to District Technologies and Distr	
child. I consent for my child to educational purposes, and I use that this access privilege can I am aware that the District wo ensure safe, orderly, and of impose guidelines on what	Digital Responsibility Guidelines (see report of be given access to District technology understand that they are expected to be reviewed at any time by myself, the fill endeavour to: Caring physical and digital learning spects to the students may see and do in digital endeavours.	lies and information systems for comply with the guidelines. I know e school or district.
 inform parents of potentia I also recognize that it is important. 	ssible to restrict access to all controver	rsial materials.
PARENT/GUARDIAN SIGNATU		DATE:(mm/dd/yyyy)
District Technologies. I underst	Digital Responsibility Guidelines and actand that if I do not follow them, I may hool and classroom rules concerning r	lose access privileges. I also agree
STUDENT SIGNATURE.		DATE.

For more information on District Technologies and Information Systems, parents are encouraged to review Burnaby Board of Education Policy 7.90.01 at burnabyschools.ca

(mm/dd/yyyy)



District Technologies & Information Systems STUDENT DIGITAL RESPONSIBILITY GUIDELINES

Burnaby School District provides students with access to Digital Technologies and Information Systems as a means to enhance their learning. Students have access to, amongst other things, public websites, secure virtual classrooms, discussion boards, video files, digital pictures, audio files, library systems, e-mail, file storage, printing, encyclopaedias, wikis, blogs, texting, social media and messaging tools.

The District will endeavour to:

- ensure safe, orderly, and caring physical and digital learning spaces;
- impose guidelines on what students may see and do in digital environments;
- inform parents of potential risks.

Digital Responsibility Guidelines apply to all students using District Technologies or technological devices within Burnaby School District. Students are expected to review and adhere to these guidelines or in the case of younger children, parents/guardians are expected to review these guidelines with their child.

To be issued access privileges to District Technologies and Information Systems, all users must fill out the **District Technologies & Information Systems Student Acceptable Use Agreement**.

DO

- Use District and personally-owned devices and digital tools for educational purposes
- Follow copyright laws and acknowledge and respect the ownership of others for their creative work
- Keep your personal information private (like last name, home address, phone numbers, pictures and passwords)
- Respect the privacy of other students and adults
- Report uncomfortable, unsafe, or inappropriate behaviour or messages to your teacher or principal
- Treat others fairly and with respect
- Understand that digital tools such as e-mail, messaging, social networks, websites, wikis, blogs and texting are not guaranteed to be private

DO NOT

- Share your passwords
- Take and use someone else's identity (their name, password)
- Falsify your identity
- Take pictures or videos of others and share them without their permission
- Hurt or mistreat others by what you create or share
- Harass, stalk, bully, threaten, insult, abuse, or attack others
- Damage computer systems, networks, digital tools or content
- Access secure information owned by others without their permission
- Use information or work of others as your own without their permission
- Use software programs that are not provided by the District or that are not free or purchased by you for your personally-owned device
- Use District or personally-owned devices for commercial, illegal, or malicious purposes
- Use District or personally-owned devices to operate file sharing services
- Access/distribute pictures, videos, audio or text that contains inappropriate nudity/language
- Meet with someone you met online without parent/guardian consent

For more information on District Technologies and Information Systems, parents are encouraged to review Burnaby Board of Education Policy 7.90.01

NOTICE TO PARENTS REGARDING MEDIA IN SCHOOLS



Student Name:				Grade:
PLEASE PRINT	(Last)	(Fir	st)	
permitted to come or video, for the pu	vision, newspapers, a to the school. They m urposes of promoting on, and encouraging s	ay want to conduct i public understandin	nterviews with st g of school progr	udents, or take photos
	IS ALLOWED to be return this form to the		nterviewed by me	edia please check this
please check t	OT want your child's this box. Advise your 2 below), sign and ret	r child and their teac	hers and initial th	•
2. I have adv3. I request child's im4. I consent necessary	red my child to avoid vised the teacher that that school and distri- tage, work or name co- to disclosure by the to give effect to this te that I can override to	I want my child to a ct staff will take al ollected or published school/district starequest.	l reasonable step d by media. ff of the persona	s to avoid having my
_	e receipt of this no ediately, and will be			tand that it will be
Parent/Guardian	Name:			
	Last		Fi	rst
*Parent/Guardia	n Signature:		Date:	(mm/dd/yyyy)
				(mm/dd/yyyy)

*This form must be signed by the parent/guardian who has the right to exercise their child's privacy protection rights. If there is a parental rights court order, please attach a copy of the documentation.

PLEASE NOTE: School and district staff cannot control photos/video taken by the media or others in public locations (e.g. field trip) or school events open to the public (e.g. sports events, student performances, school board meetings, etc.

STUDENT PERSONAL INFORMATION CONSENT 2018-2019

Student Name: _____



Grade:

This consent form pertains to the collection, use, and sharing of student personal information during the 2018-2019 school year. Please review, sign, and return it to the school. It will be effective immediately, and will be valid until September 30, 2019.

PLEASE PRINT	(Last)	(First)			
directly related to and	are authorized to collect, use, and necessary for their educational ntal or student consent is require	l functions. For other schoo			
videos, images, work district websites, fo	rict is seeking your consent to and/or names of students in a vor education related purposes g the school community, and inf	variety of publications and/ors (e.g. recognizing/encoura	r on school or aging student		
 school or district in limited or public school or district (e.g. YouTube), w 	 For example, student names, images or work might be used in: school or district communications (e.g. newsletters, brochures, yearbooks and/or reports) in limited or public circulation; school or district websites, social media sites (e.g. Facebook), and/or online video channels (e.g. YouTube), with limited or public access; videos, CDs, and DVDs designed for educational use only. 				
I CONSENT to the collection, use, and sharing of my child's name, work and/or image for use by the school or district for purposes as outlined above. I am aware that images/information posted on the worldwide web may be stored/accessed outside of Canada. (Note: This consent may be withdrawn at any time. However, this does not require the school or district to withdraw from publication any previously published material.) I DO NOT CONSENT to the use and disclosure of my child's name, work and/or image for					
use by the school or district this school year for purposes outlined above.					
Parent/Guardian Name:					
	Last	First			
*Parent/Guardian Si	gnature:	Date:	<u> </u>		
v	igned by the parent/guardian vents. If there is a parental righ	who has the right to exercise			

If you have questions about this consent form or about the collection of student personal information, please email <u>communications@burnabyschools.ca</u>.

documentation.



CONSENT TO SEND COMMERCIAL ELECTRONIC MESSAGES

Canada's Anti-Spam Legislation (CASL) came into effect on July 1, 2014. As a result, the school requires your consent to send electronically (email) any newsletters, community announcements, performance/sport notices, event invitations, surveys, etc. These emails may include advertising or promotions regarding school fundraisers, student photos, field trips, yearbooks, team uniforms, classroom book orders, cafeteria sales, dance tickets, graduation events or other non-profit community sports or event opportunities.

Our sustainability mandate is to reduce our environmental footprint whenever possible, which includes using electronic communication. We hope you will allow us to send or continue to send these important notices via email. Please be assured that your contact information is securely stored and notices are distributed by authorized school personnel only. We also do not share these lists with anyone.

We remain committed to providing you with information that is directly related to your child's educational experience. If you have any questions, please contact: Communication Services at communications@burnabyschools.ca

Ple	ase complete, sign and return this consent form to the	school.			
	Yes, I give my consent for the school to send me electronic messages as outlined above to the email address indicated below. I understand that my consent is considered to be ongoing however I can withdraw my consent at any time by clicking on the unsubscribe link in any electronic message I receive.				
	No, I do not wish to receive electronic messages from the	school as outlined above.			
Dat	te:Parent/Guardian:				
		(please print)			
Em	nail Address:				
12111	(please print)				
Ha	ve you been on our email list before? ☐ Yes ☐	l No			
If y	ves, is this the email address that we currently have on t	äle? □ Yes □ No			
Par	rent/Guardian Signature:				
	Student Name (first, last) – please print	Pupil #	Grade		
	· · · · · · · · · · · · · · · · · · ·	•			







Indigenous Education Enhancement Services

Dear Parents,

Welcome back for another school year! According to our school records you have identified your son/daughter as having Indigenous ancestry. This letter is intended to outline our programs and services in Indigenous Education in the Burnaby School District and how you might access these programs and services. In Burnaby Schools, we deliver our services through an integrated approach that looks to incorporate the First Peoples Principles of Learning into your child's classroom and school experience. The First Peoples Principles of Learning include:

Learning ultimately supports the well-being of the self, the family, the community, the land, the spirits, and the ancestors.

Learning is holistic, reflexive, reflective, experiential, and relational (focused on connectedness, on reciprocal relationships, and a sense of place).

Learning involves recognizing the consequences of one's actions.

Learning involves generational roles and responsibilities.

Learning recognizes the role of indigenous knowledge.

Learning is embedded in memory, history and story.

Learning involves patience and time.

Learning requires exploration of one's identity.

Learning involves recognizing that some knowledge is sacred and only shared with permission and/or in certain situations.

Through a focus on these Principles of Learning we approach our services by targeting classrooms with Indigenous learners to incorporate Indigenous culture and perspectives as a part of their learning.

What services are available through Indigenous Education in Burnaby?

There are a number of different services available for Indigenous students in Burnaby Schools. Although your child may not require access to all of the services provided, here are some of the services that are available:

- Cultural teachings/lessons within the classroom
- Academic liaising and guidance via Secondary Success Teachers and Indigenous Learning Inquiry Teachers
- Reading Recovery and Literacy Enhancement Services
- Grade 7 Transition to Secondary support
- Attendance monitoring and intervention
- School based cultural programs and services
- District wide cultural events, resources, leadership opportunities and celebrations
- Assistance with Post-Secondary Transition





How do I access services?

By self-identifying your child as being of Indigenous ancestry, your child may have access to the services listed above. Your child may not require access to all services provided by Indigenous Education, but self-identification with your school office or Indigenous staff person will provide us the opportunity to incorporate your child into our services.

Will my child be pulled out of class for Indigenous Enhancement services?

Generally, your child will not be pulled out from class to be provided services from Indigenous Education as our programming intends to be as integrated as possible. There are initiatives such as Reading Recovery, the grade 7 transition program or Indigenous post-secondary visits that may require students to miss class. If these services are offered to your child, we will seek your consent to have your student miss class to access these services.

How do I contact Indigenous Education?

It is important to us that you have a strong understanding of the programs and services being offered to your child. If you have questions, comments or concerns please contact your school to reach the staff person assigned to Indigenous Education, or visit our website at https://burnabyschools.ca/indigenouseducation/staff/

Continued Access to Indigenous Enhancement Services

We will continue to provide services to all self-identified students of Indigenous ancestry for the 2018-2019 school year. We will assume that your child will continue with services unless we hear otherwise from you. If at any time you no longer wish to partake in Indigenous Education Enhancement Services, please contact your school office and your child will be removed from the service list.

For more information on Indigenous Education in Burnaby Schools, please visit our website at https://burnabyschools.ca/indigenouseducation/

In friendship,

Brandon Curr District Principal Indigenous Education

Continued Access to Indigenous Education Programs and Services

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September 2010	
Dear Parent/Guardian of an Indigenous Student	2018-2019 🗆
According to our school records, you have identified your son/ daughter as	2019-2020 🗆
having Indigenous ancestry. This also means you can opt in for Indigenous programs and services while enrolled in the Burnaby School District.	2020-2021 🗆
 Saying "Yes" to Indigenous Ancestry provides an opportunity to 	2021-2022 🗆
receive continued access to Indigenous Education programs and	2022-2023 🗆
services. 2. Each school year, we are required to <i>confirm</i> your desire for	2023-2024 🗆
continued access to programs and services.	2024-2025 🗆
In the column on the right, please check all the school years you'd like continued access for your son/daughter. For example,	2025-2026 🗆
Kindergarten parents would check all 13 boxes. For Grade 1 check only the first 12 boxes.	2026-2027 🗆
4. Your signature confirms that you have identified all the applicable	2027-2028 🗆
years you want continued access to programs and services for your	2028-2029 🗆
son/daughter.	2029-2030 🗆
Son/Daughter Name:(Print Name)	2030-2031 🗆
Grade: School:	
	i

- a) Please return this form to your school secretary or the Indigenous Youth & Family Worker at your school **before September 22, 2018.**
- b) You can also opt out of access \square I do not want access to programs and services for my son or daughter.
- c) If you'd like to view our programs and services they are located on the school district website https://burnabyschools.ca

For more information regarding access to Programs and Services, please contact Brandon Curr, District Principal, Indigenous Education (604-296-6900 extension 661019).

Please check applicable years for access to Programs and Services



Parent/Guardian signature: ___



Checked boxes provide

us permission to give

continual service year

only need to contact us

discontinue access to

programs and services.

after year. You will

if you wish to

Burnaby Board of Education 5325 Kincaid Street, Burnaby BC V5G 1W2 Phone: 604-296-6900



Burnaby Mountain Secondary School

NOTICE OF WITHDRAWL

The following student is enrolling at **Burnaby Mountain Secondary School** for the 2018-2019 school year

Student Name:		
(Last)		(First)
Current Grade:	Birth Date:_	
		(Year/Month/Day)
The above-named student is currently registered at		
		(Name of current school)
but will not be returning to your school.		
Parent/Guardian Name:		
	(Please print)	
Parent/Guardian Signature:	Date:_	
Phone Number:	_	
Student Signature:	Date:	

