



**Student Registration Form**  
**Greater Saskatoon Catholic Schools**

Students who are not Canadian Citizens must contact the Newcomer Registration Centre, 420-22nd ST E 306-659-7000

School \_\_\_\_\_

Language \_\_\_\_\_ School Year \_\_\_\_\_

Kindergarten

Programs are specific to each school

**Student**

Legal Last name \_\_\_\_\_

Legal First Name \_\_\_\_\_

Legal Middle Name(s) \_\_\_\_\_

Preferred Last \_\_\_\_\_

Preferred First \_\_\_\_\_

Preferred Middle \_\_\_\_\_

Gender \_\_\_\_\_ Date of birth \_\_\_\_\_  
MMM/DD/YYYY

Student e-mail \_\_\_\_\_

Religion(Catholic or Non-Catholic) \_\_\_\_\_

Parish \_\_\_\_\_

Grade \_\_\_\_\_

Primary Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ Prov \_\_\_\_\_ PC \_\_\_\_\_

Land Location \_\_\_\_\_  
QS SEC RL TWSP REG MER

**Mailing Address ( if different than property address)**

Street Address \_\_\_\_\_

RR Number/ PO Box \_\_\_\_\_

City \_\_\_\_\_ Prov \_\_\_\_\_ PC \_\_\_\_\_

Previous School Name \_\_\_\_\_

City \_\_\_\_\_

Has your child ever been enrolled in a school in Saskatchewan? Yes No

**PARENT/GUARDIAN INFORMATION**

Last, First name \_\_\_\_\_

Relationship \_\_\_\_\_

Emergency Priority (1,2,3) \_\_\_\_\_

Emergency priority is the order in which a parent/guardian will be called. Number 1 will be the first contacted.

Parent/Guardian \_\_\_\_\_ Lives with student \_\_\_\_\_

Emergency Contact (Y,N) ☐ Legal Guardianship \_\_\_\_\_

Primary Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

**Property Address (if not living with student)**

Street Address \_\_\_\_\_

City \_\_\_\_\_ Prov \_\_\_\_\_ PC \_\_\_\_\_

Land Location \_\_\_\_\_  
QS SEC RL TWSP REG MER

**Mailing Address ( if different than student /property address)**

Street Address \_\_\_\_\_

RR Number/ PO Box \_\_\_\_\_

City \_\_\_\_\_ Prov \_\_\_\_\_ PC \_\_\_\_\_

**PARENT/GUARDIAN INFORMATION**

Last, First name \_\_\_\_\_

Relationship \_\_\_\_\_

Emergency Priority (1,2,3) \_\_\_\_\_

Emergency priority is the order in which a parent/guardian will be called. Number 1 will be the first contacted.

Parent/Guardian ☐ Lives with student ☐

Emergency Contact (Y,N) ☐ Legal Guardianship ☐

Primary Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

**Property Address (if not living with student)**

Street Address \_\_\_\_\_

City \_\_\_\_\_ Prov \_\_\_\_\_ PC \_\_\_\_\_

Land Location \_\_\_\_\_  
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**Mailing Address ( if different than student /property address)**

Street Address \_\_\_\_\_

RR Number/ PO Box \_\_\_\_\_

City \_\_\_\_\_ Prov \_\_\_\_\_ PC \_\_\_\_\_

**PARENT/GUARDIAN INFORMATION**

Last, First name \_\_\_\_\_

Relationship \_\_\_\_\_

Emergency Priority (1,2,3) \_\_\_\_\_

*Emergency priority is the order in which a parent/guardian will be called. Number 1 will be the first contacted.*Parent/Guardian ☐ Lives with student ☐Emergency Contact (Y,N) ☐ Legal Guardianship ☐

Primary Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

**Property Address (if not living with student)**

Street Address \_\_\_\_\_

City \_\_\_\_\_ Prov \_\_\_\_\_ PC \_\_\_\_\_

Land Location \_\_\_\_\_

QS SEC RL TWSP REG MER

**Mailing Address ( if different than student /property address)**

Street Address \_\_\_\_\_

RR Number/ PO Box \_\_\_\_\_

City \_\_\_\_\_ Prov \_\_\_\_\_ PC \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION (Contact if parents can't be reached in order they are to be called)***Please provide at least one emergency contact that is different than those listed above under parent/guardians – no need to re-enter parents or guardians in this area.*

Emergency Contact 1 \_\_\_\_\_ Primary Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Emergency Contact 2 \_\_\_\_\_ Primary Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Emergency Contact 3 \_\_\_\_\_ Primary Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Relationship \_\_\_\_\_

**SIBLING INFORMATION** \*Please list current school age siblings only

Legal Last Name \_\_\_\_\_ Gender \_\_\_\_\_ Birthdate \_\_\_\_\_

MMM/DD/YYYY

Legal First Name \_\_\_\_\_ Relationship \_\_\_\_\_

Legal Last Name \_\_\_\_\_ Gender \_\_\_\_\_ Birthdate \_\_\_\_\_

MMM/DD/YYYY

Legal First Name \_\_\_\_\_ Relationship \_\_\_\_\_

Legal Last Name \_\_\_\_\_ Gender \_\_\_\_\_ Birthdate \_\_\_\_\_

MMM/DD/YYYY

Legal First Name \_\_\_\_\_ Relationship \_\_\_\_\_

Legal Last Name \_\_\_\_\_ Gender \_\_\_\_\_ Birthdate \_\_\_\_\_

MMM/DD/YYYY

Legal First Name \_\_\_\_\_ Relationship \_\_\_\_\_

**STUDENT MEDICAL ALERTS**

Description \_\_\_\_\_

**OTHER STUDENT ALERTS- Health, family or other information**

Description \_\_\_\_\_

**NEWCOMER STUDENT REGISTRATION** ( proof of legal status must be provided in order to register)

Last country student attended school \_\_\_\_\_

Permanent Resident

Refugee Category

Temporary Resident

Parent Work Permit expires \_\_\_\_\_  
MMM/DD/YYYY

Study Permit (International Student Program)

Parent Study Permit expires \_\_\_\_\_  
MMM/DD/YYYY

Citizenship Country \_\_\_\_\_

Entry to Canada Date \_\_\_\_\_  
MMM/DD/YYYY

Citizenship Country 2 \_\_\_\_\_

Citizenship Effective Date \_\_\_\_\_  
MMM/DD/YYYY

Country of Birth \_\_\_\_\_

Home Language \_\_\_\_\_

Country of Origin \_\_\_\_\_

Home Language 2 \_\_\_\_\_

**INDIGENOUS ANCESTRY**

Inuit/Inuk

Metis

Non-Status- Indian

Status Indian

Living on Reserve

Reserve of Residence \_\_\_\_\_ Band Affiliation \_\_\_\_\_

**DECLARATION**

I, the Undersigned, hereby represent that I have the legal authority to register the child. I declare the information that I have provided on this form is complete and accurate. I will notify the school of any changes to the information on this form.

Date \_\_\_\_\_  
MMM/DD/YYYY

Signature of Parent/Legal Guardian \_\_\_\_\_

**Note: Your child is not officially registered until legal documentation is brought directly to the school and verified by school personnel****OFFICE USE ONLY**

Pupil Number \_\_\_\_\_

Ministry Student Number \_\_\_\_\_

Registration Date \_\_\_\_\_

Starting Date \_\_\_\_\_

Non-Catholic Student Declaration? Yes ☐ No ☐Met with Administrator Yes ☐ No ☐International Student(tuition paid?) Yes ☐ No ☐

How was the student's name and birthdate verified?

Birth Certificate ☐ Baptismal Certificate ☐ Passport ☐ Status Card ☐ Immigration Papers/Permanent Resident Card ☐

Other (Name of document) \_\_\_\_\_

Signature of School Official Verifying \_\_\_\_\_