



KILDONAN-EAST COLLEGIATE APPLICATION

STUDENT NAME: _____
(Please print first & last name)

GRADE: _____

DOCUMENTS REQUIRED WITH REGISTRATION:

Proof of Residency of Legal Guardian (2 pieces):

- ┆ Manitoba Driver's Licence
- ┆ Manitoba Health Card (verified)
- ┆ Utility Bill (Name and corresponding address)
- ┆ Tenancy Agreement (duly signed)
- ┆ Offer to purchase documents (completed – signatures)

Guardianship (if applicable):

- ┆ Court documents (Interim and/or Final Order, Variance Orders may also be applicable)
- ┆ Voluntary Placement Agreement (VPA)
- ┆ Child in Care form (**also serves as proof of residency**)

Proof of Age (For students who are new to the division):

- ┆ Birth Certificate
- ┆ Baptismal Certificate
- ┆ Passport
- ┆ Treaty Card
- ┆ Certificate of Birth registration, signed by Director of Vital Statistics

School Records and additional information:

- ┆ Transcript (most recent transcript)
- ┆ Technology Education Program Questionnaire (**if applying for a tech. ed program and do not reside in the catchment area**)

Date Received: _____ Initial: _____

OFFICE USE ONLY

Processed on: _____

- | | | |
|--|---|---|
| <input type="checkbox"/> RE | <input type="checkbox"/> TECH ED. (blue form) | <input type="checkbox"/> EAL |
| <input type="checkbox"/> In Catchment | <input type="checkbox"/> Out of Catchment | <input type="checkbox"/> Out of Division |
| <input type="checkbox"/> Accepted: Yes | <input type="checkbox"/> Accepted: No | <input type="checkbox"/> entered/assigned |

Assigned to: _____

Additional notes:

STUDENT REGISTRATION



This personal information is being collected under the authority of The Public Schools Act and will be used for educational purposes. It is protected by the Protection of Privacy provisions of The Freedom of Information and Protection of Privacy Act. If you have any questions about the collection, contact the superintendent of River East Transcona School Division, 589 Roch St., Winnipeg, Man., R2K 2P7, Tel: 204.667.7130.

STUDENT INFORMATION

PLEASE PRINT

School year: 20/____ 20____

School name: _____

Applying for Grade _____

Usual LAST name: _____ Usual FIRST name: _____

Usual MIDDLE name: _____

Legal LAST name: _____ Legal FIRST name: _____

Legal MIDDLE name: _____

Legal gender: Male Female

Preferred gender (if applicable): Trans male Trans female Two-Spirit Gender non-conforming

Birth date: (mm/dd/yy) _____ Language spoken at home: _____

Home address: Apt. # _____ House # _____ Street: _____

City: _____ Province: _____ Postal code: _____

Box #/Group #/RR #: _____ Student home #: _____ Student cell #: _____

Student Manitoba Medical: Personal # (9-digit) Student family # (6-digit)

Are you a resident of River East Transcona School Division? Yes No (If no, complete and attach a Schools of Choice application)

Is the student a high school graduate? Yes No Last school attended: _____

If not a Canadian citizen, please identify the CIC (Citizen and Immigration Canada) authority:

A) Permanent resident B) Refugee claimant C) Work permit D) Study permit E) Other _____

Date entered Canada: (mm/dd/yy) _____

OFFICE: A-C are provincially funded students

CONTACT INFORMATION

Custody: Are there any legal restrictions to this student? Yes No (If yes, a copy of legal documents must be on file at the school)

List in order of priority to call:

1st/Primary contact

LAST name: _____ FIRST name: _____ Mr. Mrs. Ms. Relationship: _____

Address: Same as above Other: _____ Postal code: _____

Employer: _____ Work phone: _____ Ext.: _____

Home phone: _____ Unlisted? Yes No Cell: _____ Email: _____

Legal guardian? Yes No Can pick up student? Yes No Has custody of student? Yes No

STUDENT REGISTRATION



Send additional report card? Yes No This contact is restricted? Yes No

Phone number to call in case of emergency: _____

Upon registration, Parent Portal login information will be provided by the school.

2nd contact

LAST name: _____ FIRST name: _____ Mr. Mrs. Ms. Relationship: _____

Address: Same as above Other: _____ Postal code: _____

Employer: _____ Work phone: _____ Ext.: _____

Home phone: _____ Unlisted Yes No Cell: _____ Email: _____

Legal guardian Yes No Can pick up student Yes No Has custody of student Yes No

Send additional report card Yes No This contact is restricted Yes No

Phone number to call in case of emergency: _____ Would like Parent Portal access Yes No

3rd contact

LAST name: _____ FIRST name: _____ Mr. Mrs. Ms. Relationship: _____

Address: Same as above Other: _____ Postal code: _____

Employer: _____ Work phone: _____ Ext.: _____

Home phone: _____ Unlisted? Yes No Cell: _____ Email: _____

Legal guardian Yes No Can pick up student Yes No Has custody of student Yes No

Send additional report card Yes No This contact is restricted Yes No

Phone number to call in case of emergency: _____ Would like Parent Portal access Yes No

Daycare or other contact

LAST name: _____ FIRST name: _____ Mr. Mrs. Ms. Relationship: _____

Address: Same as above Other: _____ Postal code: _____

Employer: _____ Work phone: _____ Ext.: _____

Home phone: _____ Unlisted? Yes No Cell: _____ Email: _____

Legal guardian? Yes No Can pick up student? Yes No Has custody of student? Yes No

This contact is restricted? Yes No Phone number to call in case of emergency: _____

STUDENT REGISTRATION



SIBLINGS

Please list the full legal names of all siblings of the student who are attending any RETSD schools—only those for whom the parent(s)/guardian(s) listed on page 1/2 are *legal* guardian(s).

SIGNATURES

The following signatures verify that the above information is true and accurate. Upon transfer/withdrawal of the student, the pupil file will be forwarded to the next school of attendance.

I consent to receive, via email, information in the form of newsletters, school updates and announcements regarding division and school activities, including fundraising and promotions. (If at any time you wish to be removed from our email list, please contact the school office.)

Email address: _____

Parent/guardian: _____ or student (if 18 or older): _____

Date: _____

INDIGENOUS IDENTITY DECLARATION

Indigenous Identity Declaration helps to support the efforts of Manitoba Education and Training and school divisions to plan and improve programs in a way that is responsive to Indigenous learners. **Providing this personal information is voluntary and optional.** It is being collected in compliance with section 36(1)(b) of the Freedom of Information and Protection of Privacy Act (FIPPA) as it is necessary for and relates directly to the activity of Manitoba and school divisions to plan, deliver and improve programs

I, _____ (name of parent/guardian, please print clearly):

- Am submitting my child's Indigenous Identity Declaration for the first time
- Am making changes to my child's Indigenous Identity Declaration
- Already submitted my child's Indigenous Identity Declaration and have no further changes to make at this time

Is your child an Indigenous person, that is, First Nation (North American Indian), Métis or Inuk (Inuit)? If "Yes," check the box(es) that best describe(s) your child now (*note: First Nations (North American Indian) include Status and Non-Status Indians*):

- Yes, First Nation (North American Indian)
- Yes, Métis
- Yes, Inuk (Inuit)

Which best describes your child's Indigenous cultural-linguistic identity? Please select up to two choices:

- | | |
|--|---|
| <input type="checkbox"/> Anishinaabe (Ojibway/Saulteaux) | <input type="checkbox"/> Oji-Cree |
| <input type="checkbox"/> Ininiw | <input type="checkbox"/> Michif |
| <input type="checkbox"/> Dene (Sayisi) | <input type="checkbox"/> Inuktitut |
| <input type="checkbox"/> Dakota | <input type="checkbox"/> Other: Please specify: _____ |

STUDENT REGISTRATION



MEDICAL QUESTIONNAIRE

Please complete the following (specify yes if physician-diagnosed)

1. Anaphylaxis Yes No
2. Anaphylaxis—has EpiPen prescribed Yes No
3. Asthma Yes No
4. Asthma—has inhaler prescribed Yes No
5. Bleeding (i.e. hemophilia, Von Willebrand disease) Yes No _____
6. Cardiac condition Yes No
7. Catheterization Yes No
8. Central line Yes No
9. Diabetes Yes No
10. Gastrostomy Yes No
11. Intermittent catheterization Yes No
12. Medication Yes No _____
13. Nasogastric tube Yes No
14. Osteogenesis imperfecta Yes No
15. Ostomy Yes No
16. Oxygen Yes No
17. Seizure disorder Yes No
18. Steroid dependence Yes No
19. Suctioning (A)—tracheal suctioning Yes No
20. Suctioning (B)—oral/nasal suctioning Yes No
21. Tracheostomy Yes No
22. Ventilator Yes No
23. Other intervention/condition/diagnosis (not listed) * Yes No _____

***Other health condition(s) must be physician-diagnosed with supporting documentation provided.**

This medical information is being collected so that appropriate health-care plans and programming may be developed. This information will only be shared with appropriate individuals. This information is protected by The Personal Health Information Act. Questions should be directed to the school principal.

STUDENT REGISTRATION



SUPPORT SERVICES

Please indicate if the student has utilized any of the following services

OFFICE: If any items have been checked off, forward to the school principal

- | | |
|--|---|
| <input type="checkbox"/> Resource | <input type="checkbox"/> School counsellor |
| <input type="checkbox"/> Reading | <input type="checkbox"/> Psychology |
| <input type="checkbox"/> Psychiatry | <input type="checkbox"/> Speech & language |
| <input type="checkbox"/> Social work | <input type="checkbox"/> Occupational therapy |
| <input type="checkbox"/> Physiotherapy | <input type="checkbox"/> Outside agency |
| <input type="checkbox"/> Child in care | <input type="checkbox"/> Other _____ |

If any services above are checked (✓), please complete details below

Name of agency/support service: _____ Contact person: _____

Address: _____ Phone: _____

Briefly describe the reason for service: _____

Name of agency/support service: _____ Contact person: _____

Address: _____ Phone: _____

Briefly describe the reason for service: _____

The support services information is being collected so appropriate educational services may be provided for your son/daughter. This information will only be shared with appropriate individuals. This information is protected by The Freedom of Information and Protection of Privacy Act. Questions should be directed to the school principal.

KILDONAN-EAST COLLEGIATE Grade 11 & 12 Registration Form 2019-2020

NAME: _____

TEACHER ADVISOR: _____

Note: Course offerings are dependent upon the number of requests; not all courses may be available.

Advanced Placement

APCS42SA	Computer Science A	AP 42S
APE42SLI	English Literature & Composition	AP 42S
APM42SA	Calculus (Ab)	42S

Applied Commerce

C20SE	Entrepreneurship	20S
C30SAE	Accounting Essentials	30S
C30SVD	Venture Development	30S
C40SDC	Marketing & Digital Commerce	40S
BL40S	Canadian Law	40S
OLBL40S	Canadian Law ONLINE	40S

Automotive Technology 10

AT20SASS	Automotive Systems and Services	20S
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Automotive Technology 11 - Select all 4 courses

AT30SCFS	Chassis Fundamentals & Service	30S
AT30SDFS	Drive Train Fundamentals & Service	30S
AT30SEFS	Engine Fundamentals & Service	30S
AT40SAES	Automotive & Electrical Systems	40S

Automotive Technology 12 - Select all 3 courses

AT40SVS1	Vehicle Systems Part 1	40S
AT40SVS2	Vehicle Systems Part 2	40S
AT40SADS	Applied Diagnostic Strategies	40S

Baking & Pastry Arts 10 – Exploratory –

Select both courses

BP20SI	Intro to Baking and Pastry Arts	20S
BP30SBCDP	Quick Breads, Cookies, Donuts and Pies	30S

Baking & Pastry Arts 11 – Select all 3 courses

BP30SYDP	Yeast Dough Products	30S
BP30SCFD	Cakes, Fillings, Icings & Decorations	30S
BP40STSP	Tarts and Special Pastries	40S

Baking & Pastry Arts 12 – Select all 3 courses

BP40SMCDP	Modern & Classic Desserts and Plating	40S
BP40SABP	Advanced Bread Products	40S
BP40SABK	Advanced Baking and Pastries	40S

Biomedical – Select all 4 courses

B40SBM	Biology	40S
C40SBM	Chemistry	40S
LWT40SBM	Life/Work Transition	40S
E40STCELA	Language & Technical Communication	40S

Career Development/Internship

LWB30S/CDI30G	Life Work Building/ Career Development Internship	2 credit
LWT40S/CDI40G	Life WorkTransition/ Career Development Internship	2 credit
LWTV40S	Life/Work Transition	1 credit

Carpentry 10 – Exploratory

CP20SCF	Carpentry Fundamentals	20S
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Carpentry 11 – Select all 4 courses

CP40SSC	Surveying Concrete	40S
CP30SCTE	Carpentry Tools & Equipment	30S
CP30SFF	Framing	30S
CP40SAF	Advanced Framing	40S

Carpentry 12 – Select all 3 courses

CP30SIEF	Interior/Exterior Finishing	30S
CP40SCM	Carpentry & Millwork	40S
CP40SAC	Applied Carpentry	40S

Collision Repair & Refinishing Tech 10 - Exploratory

CR20SICR	Introduction to Collision Repair & Refinishing	20S
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Collision Repair & Refinishing Tech 11

Select all 4 courses

CR30SFCR	Fundamentals of Collision & Refinishing	30S
CR30SAMW	Automotive Metals & Welding	30S
CR30SCP	Corrosion Protection	30S
CR40SDASR	Damage Analysis	40S

Collision Repair & Refinishing Tech 12

Select all 3 courses

CR40SWBPR	Weld-On Bolt-On Panel Replacement	40S
CR40SSPR	Surface Preparation & Refinishing	40S
CP40SCT	Color Theory & Career Preparation	40S

Computer

CS20S	Computer Science	20S
CS30S	Computer Science	30S
CS40S	Computer Science	40S

Culinary Arts 10 – Exploratory (must take both)

HH20SDRS	Dining Room Skills	20S
CA20SCP	Cooking Principles	20S

Culinary Arts 11 – Select all 3 courses

CA30SGM	Garde Manger	30S
CA30SPB	Patisserie & Baking	30S
CA30SVFSF	Vegetables, Fungi, Starches & Farinaceous Products	30S

Culinary Arts 12 – Select all 4 courses

CA40SSSS	Stocks, Soups and Sauces	40S
CA40SBD	Breakfast and Dairy	40S
CA40SMPFC	Menu Planning and Food Costing	40S
CA40SMPFS	Meats, Poultry, Fish and Seafood	40S

Dance/Drama

DA20S	Dance 1A, Dance 20S	20S
DA30S	Dance 1A, Dance 30S	30S
DA40S	Dance 1A, Dance 40S	40S
DR20S	Drama, 1A Drama	20S
DR30S	Drama, 1A Drama	30S
DR40S	Drama, 1A Drama	40S
DRTP20S	Drama, 4A Theatre Practicum	20S
DRTP30S	Drama, 4A Theatre Practicum	30S
DRTP40S	Drama, 4A Theatre Practicum	40S

Electrical Trades Tech 10 – Exploratory

ETT20SI	Intro. to Electrical Trades Tech	20S
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Electrical Trades Tech 11 – Select all 4 courses

ETT30SETF	Electrical Trades DC Fundamentals	30S
ETT30SRW	Residential Wiring	30S
ETT30SWM	Electrical Wiring Methods	30S
ETT40SETF	Electrical Trades AC Fundamentals	40S

Electrical Trades Tech 12 – Select all 3 courses

ETT40SARW	Advanced Residential Wiring	40S
ETT40SAEWV	Advanced Electrical Wiring Methods	40S
ETT40SAETT	Applied Electrical Trades Technology	40S

English

E20F	English Language Arts	20F
E30SCF	ELA: Comprehensive Focus	30S
E30SPA	English Language Arts 30SPA	30S
E30STF	ELA: Transactional Focus	30S
E40SCF	ELA: Comprehensive Focus	40S
E40SLF	ELA: Literary Focus	40S
E40STC	ELA:Lang & Tech Communication	40S
E40STF	ELA: Transactional Focus	40S
OLE40STF	ELA: Transactional Focus ONLINE	40S

French

F20F	French: Communication and Culture	20F
F30S	French: Communication and Culture	30S
F40S	French: Communication and Culture	40S

Graphic Design 10 – Exploratory

GD20SFGD	Fundamentals of Graphic Design	20S
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Graphic Design 11 – Option: Select 1, 2 or 3

Major: Select all 4 courses

GD30SGDL	Graphic Design and Layout	30S
GD30SIGD	Illustration for Graphic Design	30S
GD30SIGRD	Interactive Graphic Design	30S
GD40SAIGD	Advanced Illustration for Graphic Design	40S

Graphic Design 12 –Option: Select 1, 2 or 3

Major: Select all 3 courses

GD40SAGDL	Advanced Graphic Design and Layout	40S
GD40SAIGRD	Advanced Interactive Graphic Design	40S
GD40SGDP	Graphic Design Portfolio	40S

Hairstyling 10 (Option) – Select both courses

HS20SI	Intro to Hairstyling	20S
HS20SBH	Basic Hairstyling	20S

Hairstyling 10 (Major) – Select all 4 courses

HS20SI	Intro to Hairstyling	20S
HS20SBHC	Basic Hair Cutting & Thermal Styling	20S
HS20SBH	Basic Hairstyling	20S
HS20SRSS	Related Salon Services	20S

Hairstyling 11 – Select all 4 courses

HS30SIH	Intermediate Haircutting & Barber Techniques	30S
HS30SHCO	Haircolouring	30S
HS30SIHA	Intermediate Hairstyling & Artificial Hairstyling	30S
HS30SCTS	Chemical Texture Services	30S

Hairstyling 12 – Select all 4 courses

HS40SAHC	Advanced Hairstyling & Colouring	40S
HS40SAHCC	Advanced Haircutting & Chemical Texture Services	40S
HS40SSO	Salon Operation	40S
HS40SCP	Certificate Preparation	40S

Interactive Digital Media 10

DM20SIDMD	Introduction to Interactive Digital Media	20S
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Interactive Digital Media 11

DM30SIDMD	Interactive Digital Media Design	30S
DM30SIDAC	Interactive Digital Asset Creation	30S
DM30SCIDM	Coding for Interactive Digital Media	30S

Interactive Digital Media 12 - Major- Select 4 courses

DM40SAAC	Advanced Asset Creation for IDM	40S
DM40SAC	Advanced Coding for IDM	40S
DM40SPM	Project Management for IDM	40S
DM40SFDM	Futures in IDM	40S

Mathematics

M20SE	Essential Mathematics	20S
M20SI	Introduction to Applied and Pre-Cal Mathematics	20S
M30SA	Applied Mathematics	30S
M30SE	Essential Mathematics	30S
M30SP	Pre-Calculus Mathematics	30S
M40SA	Applied Mathematics	40S
M40SE	Essential Mathematics	40S
M40SP	Pre-Calculus Mathematics	40S

Music

MUCB30S	Music, 1A Concert Band	30S
MUCB40S	Music, 1A Concert Band	40S
MUCC30S	Music, 2A Choral	30S
MUCC40S	Music, 2A Choral	40S
MUG10S	Music, 3A Guitar 10S	10S
MUG20S	Music, 3A Guitar 20S	20S
MUG30S	Music, 3A Guitar 30S	30S
MUG40S	Music, 3A Guitar 40S	40S
MUJB30S	Music, 4A Jazz Band	30S*
MUJB40S	Music, 4A Jazz Band	40S*
MUVJ30S	Music, 5A Vocal Jazz	30S**
MUVJ40S	Music, 5A Vocal Jazz	40S**
MUMP20S	Music, 7A Music Production	20S
MUMP30S	Music, 7A Music Production	30S
MUMP40S	Music, 7A Music Production	40S

* Must be enrolled in same grade level of Concert Band.

** Must be enrolled in same grade level of Concert Choir.

Photography 10 – Exploratory

PH20SPE	Introduction to Photography	20S
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Photography 11 (Option) – Select both courses

PH30SPE	Photographic Equipment	30S
PH30SPL	Photographic Lighting	30S

Photography 11 – Major-Select all 4 courses

PH30SPE	Photographic Equipment	30S
PH30SPL	Photographic Lighting	30S
PH30SDD	Digital Darkroom	30S
PH40SAPE	Adv. Photographic Equipment	40S

Photography 12 (Option) – Select both courses

PH40SAPL	Adv. Photographic Lighting	40S
PH40SADD	Adv. Digital Darkroom	40S

Photography 12 – Major-Select all 3 courses

PH40SAPL	Adv. Photographic Lighting	40S
PH40SADD	Adv. Digital Darkroom	40S
PH40SAPH	Applied Photography	40S

Physical Education

PEH10F	Physical Education/Health Education	10M
PEH20F	Physical Education/Health Education	20F
PEH30F	Physical Education/Health Education	30F
OLPEH30F	Physical Education/Health Education	30F
PEH40F	Physical Education/Health Education	40F
OLPEH40F	Physical Education/Health Education	40F

Physical Education (Outdoor Ed)

PEH30FOE	Physical Education/Health Education	30F
PEH40FOE	Physical Education/Health Education	40F

Physical Education (Personal Fitness)

PEH40FPF	Physical Education/Health Education	30F
PEH30FPF	Physical Education/Health Education	40F

Refrigeration & A/C 10 – Exploratory

RA20SI	Introduction to Refrigeration & Air Conditioning	20S
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Refrigeration & A/C 11 – Select all 4 courses

RA30SSF	Systems Fundamentals	30S
RA30SEF	Electrical Fundamentals	30S
RA30SPF	Piping Fundamentals	30S
RA40SEC	Electrical Controls	40S

Refrigeration & A/C 12 – Select all 3 courses

RA40SRAC	Refrigeration Air Cooling Systems	40S
RA40SHVA	Heating Ventilation, A/C System	40S
RA40SARA	Applied Refrigeration A/C	40S

Science

S20F	Science	20F
B30S	Biology	30S
B40S	Biology	40S
OLB40S	Biology ONLINE	40S
C30S	Chemistry	30S
C40S	Chemistry	40S
P30S	Physics	30S
P40S	Physics	40S
S30S	Senior 3 Current Topics in Sciences	30S

Social Sciences

HEC20SFS	Family Studies	20F
HEC30SFS	Family Studies	30S
HEC40SFS	Family Studies	40S
PSY40S	Psychology	40S
OLPSY40S	Psychology ONLINE	40S

Social Studies

G20F	Geographic Issues of the 21st Century	20F
HC30F	History of Canada	30F
CTF40S	Current Topics in FNMI Studies	40S
GI40S	Global Issues: Citizenship and Sustainability	40S
H40SWC	History: Western Civilization	40S

Spanish

SP20F	Spanish: 3 Year Programming	20F
SP30S	Spanish: 3 Year Programming	30S
SP40S	Spanish: 3 Year Programming	40S

Visual Arts

VART20S	Visual Art	20S
VART30S	Visual Art	30S
VART40S	Visual Art	40S

Student: _____ Counsellor: _____

Date of application: _____ Parent e-mail: _____

It is recommended that Grade 11/12 students attend Summer School for courses that are not completed by June.

KILDONAN - EAST COLLEGIATE

845 Concordia Avenue • Winnipeg, MB R2K 2M6 • Telephone (204) 667-2960 • Fax (204) 667-1203 • www.kec.retsd.mb.ca

Dear Parent/Guardian,

The purpose of this letter is to inform you about some of the out-of-school activities or events in the local school community in which your child will participate during the course of this year. Your signature at the bottom of this form confirms that you are aware of the information provided in this letter.

The River East Transcona School Division and the staff of Kildonan-East Collegiate recognize that valuable and unique learning can take place outside of the school building. We are therefore encouraged to make use of the total resources of the local community to meet curriculum goals.

During the course of the school year, student groups will engage in activities within the local community that take them out of the school building. These activities may include but are not limited to activities and events such as fitness walking and winter activities in Physical Education Classes.

The risk of injury exists in all student activity. However, due to the very nature of some activities, the risk of injury may increase. The safety and wellbeing of students is a prime concern and every effort is made to minimize the foreseeable risks inherent in any activity.

While participating in school activities, which take them into the community, it is expected that students will conduct themselves appropriately during all aspects of schooling.

If, for some reason, your child cannot or ought to not participate in activities of this nature, please let us know.

In signing this form, I acknowledge receipt of this letter and the information provided therein.

Parental Informed Consent:

Student's Name (please print): _____

Teacher Advisor: _____

Parent/Guardian Signature

Date

Principal:

D. F. MacFarlane

Vice-Principals:

R. Hadath

A. Hirst

D. Martineau



589 ROCH STREET, WINNIPEG, MANITOBA R2K 2P7
P 204.667.7130 F 204.661.5618 www.retsd.mb.ca

Parent Permission Form **Media Coverage, Copyright Permission**

From time to time during the school year, the media and/or River East Transcona School Division may be covering school or divisional events. On occasion, while covering these events, students are interviewed and/or still or moving images of them are taken for use by the media or River East Transcona School Division, for example for use in divisional publications or videos, on websites (division, school, teacher websites) or on River East Transcona School Division's Facebook page and/or Twitter site.

Student Identification on Websites

Please be assured that on River East Transcona School Division websites (division, school, teacher websites, Division's Facebook page and/or Twitter site), your child in kindergarten to Grade 8, and their work will be identified by first name only. It is the school division's practice not to include the name of a student in kindergarten to Grade 8 with their image on River East Transcona School Division websites.

Your child in Grade 9 to 12 and their work may be identified by their full name, and their full name may be included with their image, on River East Transcona School Division websites (division, school, teacher websites, Division's Facebook page and/or Twitter site). For example, students on a sports team, in the cast of a drama or a musical ensemble, on a student council or committee, may be identified by their full name, with or without their image.

Student Copyright Permission

A student's work is copyrighted to that student. Permission must be granted by the student, and their parent/guardian if they are a minor, to have their work published by the media or River East Transcona School Division, for example in divisional publications or videos, or on websites (division, school, teacher websites, Division's Facebook page and/or Twitter site).

Please check the appropriate box and sign below:

I give permission for my child to be:

Interviewed for publication by:

School and divisional staff or students (fundraising, newsletters, websites) Yes No

Media (newspaper, radio, TV) Yes No

Photographed or to appear on video for publication by:

School and divisional staff or students (fundraising, newsletters, websites) Yes No

Media (newspaper, radio, TV) Yes No

River East Transcona School Division's Facebook page and/or Twitter site Yes No

Copyright:

I give permission for my child's work to be published by the media or the division. Yes No

Please note:

Parents who indicate "no" on any of the permission items identified in the exhibit need to discuss this decision with their son/daughter and indicate to the child what actions must be taken in these situations.

Student Name		
Parent Name	Parent Signature or Student Signature if 18 years of age or older	Date
School Name	Homeroom Teacher/Advisor	Grade

This form will be applicable until the student transfers to another school or parents indicate a change in the permissions.

Effective Date:	June 1, 2004 June 17, 2008; December 16, 2008;	Policy
Amended Date:	March 15, 2011; January 17, 2012	Regulation
Board Motion(s):	373/04; 221/08; 392/08; 70/11; 9/12	Exhibit XXX
Legal/Cross Reference:		

Computer Use Permission Form For Students in Kindergarten to Grade 12

We are pleased to offer students of River East Transcona School Division access to the divisional computer network for electronic mail and Internet. To gain access to email and Internet, all students under the age of 18 must obtain parental permission and must sign and return this form to the school. Students 18 years and over may sign their own forms.

(1) Internet Safeguards

Access to email and the Internet will enable students to explore thousands of libraries, databases and bulletin boards while communicating with Internet users throughout the world.

On a global network, it is impossible to restrict access to controversial materials. It is the shared responsibility of the student, parent, teacher and administrator to ensure that access to networks and computers provided by the school system is not abused.

Some material accessible via the Internet might contain items that are illegal, defamatory, inaccurate or potentially offensive to some people. ***The River East Transcona School Division uses an Internet filtering system to minimize access to inappropriate websites (e.g.: pornography). In addition, all student email messages are sent through a content filter, which scans for obscene or threatening language.*** While we do everything, we can to prevent such access, it is not possible to *guarantee* that students will not accidentally or purposely find inappropriate material. We believe that the benefits to students from access to the Internet, in the form of information resources and opportunities for collaboration, exceed any disadvantages. But ultimately, parents and guardians of minors are responsible for setting and conveying the standards that their children should follow when using media and information sources. To that end, River East Transcona School Division supports and respects each family's decision whether or not to approve computer access.

(2) Division Internet and Email Rules

Students are responsible for good behaviour on school computer networks just as they are in a classroom or a school hallway. Communications on the network are often public in nature. General school rules for behaviour and communications apply.

The network is provided for students to conduct research and communicate with others. Access to network services is given to students who agree to act in a considerate and responsible manner. Parent permission is required. **Access is a privilege – not a right.** Access entails responsibility.

Individual users of the divisional computer networks are responsible for their behaviour and communications over those networks. It is presumed that users will comply with divisional standards and will honour the agreements they have signed.

Network storage areas may be treated like school lockers. Network administrators may review files and communications to maintain system integrity and ensure that users are using the system responsibly. Users should not expect that files stored on divisional servers or workstations would always be private. As outlined in board policy, the following are not permitted:

- (a) sending or displaying offensive material;
- (b) sending or displaying violent or pornographic material;
- (c) using obscene language;
- (d) using information and communication technology to harass, insult or attack others (cyber-bullying);
- (e) damaging computers, computer systems or computer networks;
- (f) accessing, uploading, downloading or distributing material that the school has determined objectionable;
- (g) violating copyright laws;
- (h) using another's password;
- (i) trespassing in another's folders, work or files;
- (j) intentionally wasting any resources or introducing a virus or any destructive data into the network;
- (k) employing the network for commercial purposes.

Violations of this policy may result in a loss of access, other disciplinary measures, legal action or a demand for financial reimbursement.

A copy of the complete policy (IJND – Computer Technology Use) is available at the school upon request or at www.retsd.mb.ca.

Parent Permission Section

Computer Use Permission

As a parent or legal guardian of the minor student signing below, I give permission for my son/daughter to have access to:

World Wide Web (<i>Filtered</i> Internet Access)	Yes	<input type="radio"/>	No	<input type="radio"/>
Individual email (<i>Filtered</i> access and for students in grades 3 to 12 only)	Yes	<input type="radio"/>	No	<input type="radio"/>

Please note:

Parents who indicate “no” on any of the above points need to discuss this decision with their son/daughter.

Parental Responsibility:

I understand that any violation of use policies could result in loss of access, personal payment of costs incurred and possible prosecution.

Please Initial: _____

I understand that the use of the Internet as part of an educational program is a privilege, not a right, and inappropriate use will result in cancellations of those privileges.

Please Initial: _____

_____	_____	_____
Student Name	Parent Signature or Student Signature if 18 years of age or older.	Date
_____	_____	_____
Parent Name	Homeroom Teacher/Advisor	Grade
_____	_____	_____
School Name		

Student Responsibility and Commitment (Students in Grades 3 to 12, please sign.)

As a user of the River East Transcona School Division computer network, I hereby agree to comply with the divisional computer technology use policy, communicating over the network in a responsible fashion while honouring all relevant laws and restrictions.

_____	_____
Student Name	Student Signature

This form will be applicable until the student enters Grade 3, transfers to another school, or parents indicate a change in permissions.

Effective Date:	June 1, 2004	Policy
Amended Date:	June 20, 2006; June 17, 2008	Regulation
	March 15, 2011	
Board Motion(s):	372/04; 326/04; 221/08; 70/11	Exhibit XXX
Legal/Cross Reference:		

CONSENT FOR EXCHANGE OF INFORMATION

I, _____
(parent/guardian's name)

give consent for the **River East Transcona School Division** to receive and/or give information about

(child's full name)

(child's birth date)

- Information may concern this child's speech, language, intellectual, emotional and social development and educational, psychiatric, hearing or health needs.
- Information may be exchanged in written or spoken form.

This information may be received from and/or given to:

(Name/Agency)

(Address) (Postal Code)

This information will be used for:

(purpose)

Information received by the division will be kept in a confidential file and be seen only by those people working on behalf of this child.

It is my choice to give consent. I understand that I may withdraw this consent at any time by notifying the division in writing.

Signature of parent/guardian

Date

Witness

Date

Telephone Consent: This consent form was discussed with the parent/guardian who verbally consented to exchange of information.

Name: (please print) _____

Signature: _____

Date: _____