

RIVER EAST COLLEGIATE REGISTRATION INFORMATION 2019-2020 - GRADE 11, 12



Please take note of the following information:

The River East Transcona School Division Board Office requires schools to acquire the following documents for registration of new students:

Proof of Residency: 2 of the following required

- Driver's License
- Manitoba Health Card
- Tenancy agreement (duly signed)
- Offer to purchase documents (completed-signatures)
- Utility bill (name and corresponding address)

Guardianship

- Court documents (Interim and/or Final Order, Variance Orders may also be applicable)
- Voluntary Placement Agreement (VPA)
- Child in Care form

Proof of Age

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

Additionally, River East Collegiate will only consider a registration form to be completed when it includes the **student's most recent transcript and attendance record**.

Once all required documents have been gathered and handed in, the registration process will be initiated.

Collection of a registration is not a guarantee of acceptance at River East Collegiate.

STUDENT REGISTRATION

NEW - REC - Grade 11, 12 2019-2020



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.

RIVER EAST COLLEGIATE 2019-2020

CURRENT Grade 10, 11, 12 COURSE SELECTION FORM

STUDENT NAME: _____ T.A.: _____

Please refer to the 2019-2020 Course Selection Guide for a list of course descriptions.

INSTRUCTIONS: PLEASE INDICATE (■) THE COURSES FOR WHICH YOU ARE REGISTERING.

- | | | |
|--|--|--|
| <input type="checkbox"/> Computer Science Honours 20S PA
<input type="checkbox"/> Creative Promotions 20S
<input type="checkbox"/> Dance 1A, Dance 20S
<div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> <input type="checkbox"/> Deutsch 20G AND
 <input type="checkbox"/> Geographie (German) 20G
 <input type="checkbox"/> Digital Pictures 25S AND
 <input type="checkbox"/> Digital Film Making 25S </div> <input type="checkbox"/> Drama 1A, Drama 20S
<input type="checkbox"/> English Language Arts 20F PA
<input type="checkbox"/> English Language Arts 20F
<input type="checkbox"/> Entrepreneurship 20S
<input type="checkbox"/> Electronics Technology 20G
<div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> <input type="checkbox"/> Food and Nutrition 25S AND
 <input type="checkbox"/> Textile Arts and Design 25S </div> <input type="checkbox"/> Family Studies 20S
<input type="checkbox"/> French 20F: Communication and Culture 20F
<input type="checkbox"/> Geographic Issues of the 21 st Century 20F PA
<input type="checkbox"/> Geographic Issues of the 21 st Century 20F
<input type="checkbox"/> History: American 20G
<input type="checkbox"/> Life/Work Planning 20S
<input type="checkbox"/> Mathematics: Essential 20S
<input type="checkbox"/> Mathematics: Introduction to Applied and Pre-Calculus Math 20S PA
<input type="checkbox"/> Mathematics: Introduction to Applied and Pre-Calculus Math 20S
<input type="checkbox"/> Music 1A, Concert Band 20S
<input type="checkbox"/> Music 2A, Concert Choir 20S
<input type="checkbox"/> Music 3A, Guitar 20S
<input type="checkbox"/> Music 7A, Music Production 20S
<input type="checkbox"/> Personal Finance 20S
<input type="checkbox"/> Physical Education/Health Education 20F
<input type="checkbox"/> PE 21G1 Elements of Wilderness Education
<div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> <input type="checkbox"/> Print Communications 25S AND
 <input type="checkbox"/> Keyboarding 25S </div> <input type="checkbox"/> Science 20FPA
<input type="checkbox"/> Science 20F
<input type="checkbox"/> Spanish: 4 Year Programming 20F
<input type="checkbox"/> Ukrainian: 12 Year Programming 20G
<input type="checkbox"/> Visual Arts 1A, Visual Art 20S
<input type="checkbox"/> Woodwork Technology 20G | <input type="checkbox"/> Accounting Essentials 30S
<div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> <input type="checkbox"/> Animation-2D 35S AND
 <input type="checkbox"/> 3D Modeling 30S </div> <input type="checkbox"/> Biology AP 32S
<input type="checkbox"/> Biology 30S
<input type="checkbox"/> Chemistry AP 32S
<input type="checkbox"/> Chemistry 30S
<input type="checkbox"/> Computer Science Honours 40S PA
<input type="checkbox"/> Computer Science 30S
<input type="checkbox"/> Current Topics in the Sciences 30S
<input type="checkbox"/> Dance 1A, Dance 30S
<div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> <input type="checkbox"/> Deutsch AP 32S AND
 <input type="checkbox"/> Globale Themen 40S in German (Global Issues) </div> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> <input type="checkbox"/> Desktop Publishing 35S AND
 <input type="checkbox"/> Data Collection and Analysis 35S </div> <input type="checkbox"/> Drama 1A, Drama 30S
<input type="checkbox"/> English: Literary Focus PA 30S
<input type="checkbox"/> ELA: Comprehensive Focus 30S
<input type="checkbox"/> ELA: Literary Focus 30S
<input type="checkbox"/> ELA: Transactional Focus 30S
<div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> <input type="checkbox"/> English Transactional 30S AND
 <input type="checkbox"/> Canadian History 30S </div> <input type="checkbox"/> Family Studies 30S
<div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> <input type="checkbox"/> Food and Nutrition 35S AND
 <input type="checkbox"/> Textile Arts and Design 35S </div> <input type="checkbox"/> Food and Nutrition 30S
<input type="checkbox"/> French 30S: Communication and Culture 30S
<input type="checkbox"/> History of Canada Honours 30F PA
<input type="checkbox"/> History of Canada 30F
<div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> <input type="checkbox"/> Life/Work Building 30S AND
 <input type="checkbox"/> Student-Directed Career Exploration 30S </div> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> <input type="checkbox"/> Interactive Media 35S AND
 <input type="checkbox"/> Broadcast Media 35S </div> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> <input type="checkbox"/> Mathematics: Honours 30S PA AND
 <input type="checkbox"/> Mathematics: Honours 40S PA </div> <input type="checkbox"/> Mathematics: Applied 30S
<input type="checkbox"/> Mathematics: Essential 30S
<input type="checkbox"/> Mathematics: Pre-Calculus 30S
<input type="checkbox"/> Music 1A, Concert Band 30S
<input type="checkbox"/> Music 2A, Concert Choir 30S
<input type="checkbox"/> Music 3A, Guitar 30S
<input type="checkbox"/> Music 7A, Music Production 30S
<input type="checkbox"/> Physical Education/Health Education 30F
<input type="checkbox"/> PE30FALT Elite Football or Basketball
<input type="checkbox"/> PE30FPF Introduction to Fitness
<input type="checkbox"/> PE30FWW Male/Female Gender Wellness
<input type="checkbox"/> Physics 1 AP 42S
<input type="checkbox"/> Physics 30S
<input type="checkbox"/> Retailing Perspectives 30S
<input type="checkbox"/> Spanish: 4 Year Programming 30S
<input type="checkbox"/> Venture Development 30S
<input type="checkbox"/> Ukrainian: 12 Year Programming 30S
<input type="checkbox"/> Visual Arts 1A, Visual Art 30S
<input type="checkbox"/> Visual Arts 2A (Canadian Aboriginal Art)
<div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> <input type="checkbox"/> Web Design 35S AND
 <input type="checkbox"/> Interactive Websites 35S </div> <input type="checkbox"/> Woodwork Technology 30G | <input type="checkbox"/> Accounting Systems 40S
<input type="checkbox"/> Applied Technology 40S
<input type="checkbox"/> Biology AP 42S
<input type="checkbox"/> Biology 40S
<input type="checkbox"/> Business Management 40S
<input type="checkbox"/> Canadian Law 40S
<input type="checkbox"/> Chemistry AP 42S
<input type="checkbox"/> Chemistry 40S
<input type="checkbox"/> Computer Science A – AP 42S
<input type="checkbox"/> Computer Science Principles 42S
<input type="checkbox"/> Computer Science 40S
<input type="checkbox"/> Current Topics in FNMI Studies 40S (First Nations, Metis, and Intuit Studies)
<input type="checkbox"/> Dance 1A, Dance 40S
<input type="checkbox"/> Deutsch AP 42S
<input type="checkbox"/> Drama 1A, Drama 40S
<input type="checkbox"/> Economic Principles 40S
<div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> <input type="checkbox"/> English: Advanced Literary Focus 40S and
 <input type="checkbox"/> English: Literature & Composition AP 42S (2 credits) </div> <input type="checkbox"/> ELA: Comprehensive Focus 40S (1 st credit)
<input type="checkbox"/> ELA: Literary Focus 40S (1 st credit)
<input type="checkbox"/> ELA: Transactional Focus 40S (1 st credit)
<input type="checkbox"/> ELA: Language and Literary Forms 40S (2 nd credit)
<input type="checkbox"/> ELA: Language & Technical Communication 40S (2 nd credit)
<input type="checkbox"/> ELA: Language & Transactional Forms 40S (2 nd credit)
<input type="checkbox"/> Environmental Science 42S AP
<input type="checkbox"/> Family Studies 40S
<input type="checkbox"/> Food & Nutrition 40S
<div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> <input type="checkbox"/> Food & Nutrition 45S AND
 <input type="checkbox"/> Environmental Design 45S </div> <input type="checkbox"/> French 40S: Communication and Culture 40S
<input type="checkbox"/> Global Issues: Citizenship & Sustainability 40S
<input type="checkbox"/> Graphic Communication Technology 40S
<input type="checkbox"/> History: Cinema as Witness to Modern History 40S
<input type="checkbox"/> History: Western Civilization 40S
<div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> <input type="checkbox"/> Life/Work Transition 40S AND
 <input type="checkbox"/> Student-Directed Career Exploration 40S </div> <input type="checkbox"/> Mathematics: Calculus (AB) AP 42S
<input type="checkbox"/> Mathematics: Applied 40S
<input type="checkbox"/> Mathematics: Essential 40S
<input type="checkbox"/> Mathematics: Pre-Calculus 40S
<input type="checkbox"/> Music 1A, Concert Band 40S
<input type="checkbox"/> Music 2A, Concert Choir 40S
<input type="checkbox"/> Music 3A, Guitar 40S
<input type="checkbox"/> Music 7A, Music Production 40S
<input type="checkbox"/> Physical Education/Health Education 40F
<input type="checkbox"/> PE40FALT Elite Football or Basketball
<input type="checkbox"/> PE40FPF Advanced Fitness
<input type="checkbox"/> PE40FWW Male/Female Gender Wellness
<input type="checkbox"/> Physics 2 AP 42S
<input type="checkbox"/> Physics 40S
<input type="checkbox"/> Psychology 40S
<input type="checkbox"/> Spanish: 4 Year Programming 40S
<input type="checkbox"/> Ukrainian: 12 Year Programming 40S
<input type="checkbox"/> Visual Arts 1A, Visual Art 40S
<input type="checkbox"/> Woodwork Technology 40S |
|--|--|--|

ADDITIONAL OPTION:

ATTENTION ALL STUDENTS

1. Grade 12 students require at least FIVE Grade 12 credits in order to graduate. **6 credits at the grade 12 level – 5 + PE are required for university entrance)**
2. Check information regarding post-secondary entrance requirements.
3. Students may enroll in more than 1 math credit at any level.

Date of Application: _____

Signature of Student: _____

Signature of Parent/Guardian: _____

Approved by Teacher Advisor: _____

STUDENT FEES (\$50.00) MUST ACCOMPANY THIS APPLICATION FORM

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).*** 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 digital citizenship 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 as does the divisional Code of Conduct.

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 administrators shall review files and communications to maintain system integrity and ensure that users are using the system responsibly and in accordance with all applicable policies. Users acknowledge that they have no expectation of privacy in respect of their use of divisional servers or workstations or anything stored on same.

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, altering or reconfiguring 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 or illegal purposes.

Violations of this policy may result in a loss of access, other disciplinary measures, legal action or a demand for financial reimbursement. Violations of this policy may also constitute a violation of the divisional code of conduct and/or user responsibility and/or laws including the Criminal Code.

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
(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 legal consequences.

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 Name

Parent Signature or Student
Signature if 18 years of age
or older.

Date

School Name

Homeroom Teacher/Advisor

Grade



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	<input type="radio"/>	No	<input type="radio"/>
Media (newspaper, radio, TV)	Yes	<input type="radio"/>	No	<input type="radio"/>

Photographed or to appear on video for publication by:

School and divisional staff or students (fundraising, newsletters, websites)	Yes	<input type="radio"/>	No	<input type="radio"/>
Media (newspaper, radio, TV)	Yes	<input type="radio"/>	No	<input type="radio"/>
River East Transcona School Division's Facebook page and/or Twitter site	Yes	<input type="radio"/>	No.	<input type="radio"/>

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;	Policy
Amended Date:	December 16, 2008; 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:		



River East Collegiate

295 Sutton Ave. | Winnipeg, MB R2G 0T1 | Tel: 204.338.4611 | Fax: 204.338.9515
Principal: Mrs. D. Posthumus | Vice-principal: Mrs. A. Cieszecki | Vice-principal: Mr. J. Zoppa
Email: rec@retsd.mb.ca | Web: www.rec.retsd.mb.ca

September 2019

PARENTAL INFORMED CONSENT FOR OUT-OF-SCHOOL ACTIVITIES PHYSICAL EDUCATION PROGRAM

BOARD RESPONSIBILITIES: The board will make every reasonable effort through the application of its policies and procedures, to provide for thorough preparation and planning and implementation of out of school activities undertaken by its employees, agents and officers.

Informed Consent:

Activity Title: Physical Education Program
Date of Activity: This form will be applicable until the student transfers to another school or parents indicate a change in the permissions.

Name of Student (please print): _____

I / We understand and acknowledge that my / our child may suffer personal and potentially serious injury due to an unforeseeable event associated with participation in sports, recreational activities and other off-school site programs, and voluntarily assume the risk of injury inherent in the sport, recreational activity or other off-school site program.

I / We understand that, in case of emergency medical or hospital services being required by the above-listed participant, and with the understanding that every reasonable effort will be made by the school/hospital to contact me, my signature on this form authorizes the board, through its employees, agents, and officers, [to] secure such medical advice and services as they deem necessary for my child’s health and safety, and that I shall be financially responsible for such advice and services.

I / We understand that the Rules and Regulations pertaining to this activity are designed for the safety and protection of participants

I / We acknowledge my right to obtain as much information as I require about this program or activity and associated risks and hazards, including information beyond that provided to me by the school.

I / We acknowledge that it is my responsibility to advise the school of any medical and/or health concerns of my child that may affect his/her participation in the stated program or activity.

I / We understand and agree that this is a part of the school program. I / We also understand that as a result of participating in this program that the participant is expected to follow the school procedures and code of conduct and that any deviations from these may result in consequences from the school administration.

I / We declare having read and understood the above **INFORMED CONSENT AGREEMENT** in its entirety and hereby consent to participate being aware of all the foregoing.

Parent/Guardian Signature

Date

In order for your child to participate in this event, this signed consent form must be received at the school before the event.

Effective Date: December 16, 2003
Amended Date: May 4, 2004; June 21, 2005; April 17, 2018
Board Motion(s): 683/03; 304/04, 349/05; 94/18
Legal/Cross Reference: UOA-R – Procedures for Out of School Education

Review Date:

