

Elementary Registration Form 2023-2024 Caroline Robins Community School

Students who are not Canadian citizens must contact the Newcomer Student Centre, $310-21^{\rm st}$ Street East, (306) 683-8400

STUDENT INFORMATION								
Student's Legal name		Birthdate Gender						
Last Name		MMM DD YYYY □ Male □ Female						
		☐ Unspecified						
First Name		Languages First Language						
		Second Language						
Middle Name		Has student ever been registered with Saskatoon Public Schools?						
		☐ Yes ☐ No						
Usual or Called Name								
(If different from First Name)		Previous School Attended Previous School's Location						
Registering for Grade								
** For PK (PreKindergarten) and K (Kindergarten) options please contact your school								
First Nation, Inuit and Métis (voluntary self-declaration)								
☐ First Nation Status	☐ First Nation	n Non-Status 🗌 Inuit 🔲 Métis						
Reserve Name:								
Citizen altine	tudant a Canadian sit	itican 2						
•	tudent a Canadian cit							
If not a Canadian citizen conta								
NEWCOMER STUDENT CENTRE	E USE ONLY Las	ast Country Student Attended School:						
Proof of legal status must be pr	rovided in order to re	register						
Permanent Resident	☐ Refugee Cat	Category Parent Work Permit Exp mmm/dd/yyyy						
☐ Study Permit (Internation	nal Student Program)	n) Parent Study Permit Exp mmm/dd/yyyy						
Signa	ature of school officia	cial verifying document						
	was the student's nan	ame and birthdate verified?						
☐ Birth Certificate	☐ Passport	t Status Card						
☐ Immigration Papers / Per	rmanent Resident Car	Card Other (Name Official Document)						
Signa	ature of school officia	cial verifying document						
STUDENT'S RESIDENCE House Number	Λ m+# //c // // // // // // // // // // // //	STUDENT'S CONTACT INFORMATION Area Code Phone						
nouse Number	Apt# (if applicable)	Area Code Priorie						
Street		Email						
30000								
City		Area Code Cell						
City								
Province	Postal Code	Student resides with Two Mother Father						
Province	Postal Code	Parents						
		☐ Joint ☐ Relative ☐ Guardian						
		Custody						
EMERGENCY / MEDICAL INFO	RMATION							
Who should be contacted first	in the case of school	ol closure or an emergency? (e.g. Mother, Father, Guardian)						
1.		, , , , , , , , , , , , , , , , , , , ,						
2.								
3. Other Emergency Contac	ct Name:	Phone ()						
4. Other Emergency Contact		Phone ()						
	hone	THORE ()						
	none 1							
Life Threatening Medical Condi	ition(s) that requires re	gular medication or requires emergency medication that the school should be aware of.						
Life Threatening Wedical Condi	tion(3) that requires regula	ular medication of requires emergency medication that the school should be aware of.						
Other Medical Condition(s) that the school should be aware of.								
Child Care								
Name Phone								

First parent/guardian	☐ Mother	☐ Step father	☐ Step N	Mother 🗌	Legal Guardian	☐ Other
Last Name			Address it	f different fr	om Student	
First Name			House/Ap	ot #		
Title	Ms.	☐ Dr.	Street			
☐ Married ☐ Single ☐ Separa	ated 🗍 Divord	ced \square Other	City			
Phone (306)			Province		Postal Code	
Email			Employer	-	1 Ostal Couc	
Cell ()			Employer I			
	er	☐ Step father		, ,	Legal Guardian	☐ Other
Second parent/guardian	er 🗌 Mother			p 🗌 ther	Legal Guardian	☐ Other
Last Name				f different fro	om Student	
First Name			House/Ap		Jili Studelit	
	Ms.	☐ Dr.	Street)(
Married Single Separa	ited Divorc	ed U Other	City		15	
Phone ()			Province		Postal Code	
Email			Employer		1	
Cell ()			Employer F	` '		
Third parent/guardian	☐ Mother [Step father	☐ Step N		-8	☐ Other
Last Name			Address if	f different fro	om Student	
First Name			House/Ap	ot #		
Title ☐ Mr. ☐ Mrs. ☐	Ms. \square Miss	☐ Dr.	Street			
☐ Married ☐ Single ☐ Separa	ated 🗌 Divorc	ed 🗌 Other	City			
Phone ()			Province		Postal Code	
Email			Employer			
Cell ()			Employer F)	
Fourth parent/guardian	□ Mother	☐ Step father	☐ Step N	Nother	Legal Guardian	□ Other
Last Name				f different fro		_
First Name			House/Ap	1	Jiii Staaciit	
Title Mr. Mrs.	Ms. Miss	☐ Dr.	Street)C #		
☐ Married ☐ Single ☐ Separa			City			
Phone ()			Province		Postal Code	
			Employer		Fostal Code	
Email						
Email Cell ()				Phone (1	
Email Cell () GUARDIANSHIP, CUSTODY, OR ACCES	SS RIGHTS	Indicate	Employer F	Phone (cument(s) ex	ist: Yes	□ No
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To submit the form electronically:

- Please fill in all relevant information on the form.
- Save the completed form to your computer.
- Email the form as an attachment to the school's email address which can be found on Saskatoon Public Schools' website.
 - o You will receive a confirmation email that the registration form was received.
- You will be required to sign the form and show legal documentation to verify the student's birthdate during your next visit to the school.

To submit at the school:

- Please fill in all relevant information, then print the form, or;
- Print the form, then fill in all relevant information.
 - Please note this form prints to 8.5" X 14" or legal paper size.
- Hand in the completed form to the school's office.

Paper copies of these forms are always available at the office of every school.