

For Office Use Only

Information Verified by (Staff Name): _____

CATCHMENT SCHOOL: _____ Date: _____

**Staff
Initial**

- Current Year** – Enrollment Date: _____ Grade: _____
 Next Year: Date of Registration: _____ Time of Registration: _____ Current/Next Grade: _____
 Cross Boundary: Yes No If Yes, Name of Cross Boundary School Requested: _____

REGISTRATION DOCUMENTATION:
Proof of Age:

- Birth Certificate
 Certificate of citizenship
 Immigration Canada documents
 Passport
 Permanent Resident Card
 Aboriginal Status Card
 Driver's License (if over 19)

Proof of Residency:

- Driver's License
 Rental Agreement
 Municipal Tax Bill
 Utility Bill
 Parent's Care Card
 Parent's BC Services Card

Proof of Physical Address (catchment area schools only):

- Driver's License
 Proof of Purchase of Residence
 Municipal Tax Bill
 Notary Authorized Letter
 Rental Agreement, accompanied with:
 Hydro, Gas, Cable or Telephone Bill
 Mortgage Statement

STUDENT INFORMATION:

Legal Last Name: _____ Usual Last Name: _____
 Legal First Name: _____ Usual First Name: _____
 Legal Middle Name: _____ Usual Middle Name: _____
 Birth Date: _____ Age: _____ Legal Gender: M F / Preferred: M F Transgender
(DD-MM-YYYY) (If Applicable)
 Home Phone No. _____ Cell Phone No. _____
 Student Email (if applicable): _____
 Address: _____
Apt #, Street Name City Province/Postal Code

Mailing Address if different from above: _____

CITIZENSHIP: Country of Birth: _____ Citizen of: _____ Immigration Status: _____

LANGUAGE: At Home _____ Most Used _____ First _____

INDIGENOUS ANCESTRY: NO / If YES, please tick the applicable ancestry below:

- Inuit Metis Non-Status Status-Off Reserve Status-On Reserve

Band of Origin: _____ Band of Residence: _____

PREVIOUS SCHOOL: _____ District #: _____ City: _____

 Has student ever attended a **Mission school or StrongStart Program** YES Name of School: _____
 NO

MEDICAL: Care Card Number: _____ Doctor's Name: _____ Phone: _____

 Student has potentially life threatening condition. Details: _____

Please arrange a meeting with the school Principal if the student has a medically diagnosed life-threatening condition.
To be filled out by Principal or designate when a life threatening medical condition exists: Doctor's Note Requested
 Doctor's Note Received

SPECIAL NEEDS or LEARNING CONSIDERATIONS:
Identified Learning Needs / Special Needs: Yes No Specify: _____

 Student currently has an **Individualized Education Plan (IEP):** Yes No If yes, current designation(s): _____

Other information: _____

PARENTS(GUARDIANS) & CONTACTS

Parent/Guardian #1: Relationship: _____

Last Name: _____

First Name: _____

Home Ph: _____ Cell Ph: _____

Work Ph: _____ Email: _____

Living with Student: Yes No Has Custody: Yes No

Can pick up?: Yes No Speaks English: : Yes No

Address if different: _____

CUSTODY Are there any legal documents in force re:

Custody/Guardianship/Access Yes No

If yes, have you provided the school with a copy of these legal documents? Yes No

Parent/Guardian #2: Relationship: _____

Last Name: _____

First Name: _____

Home Ph: _____ Cell Ph: _____

Work Ph: _____ Email: _____

Living with Student: Yes No Has Custody: Yes No

Can pick up?: Yes No Speaks English: : Yes No

Address if different: _____

CUSTODY – if Agency Representative (eg. MCFD):

Continuing Custody Order Temporary Custody Order

If yes, have you provided the school with a copy of these legal documents? Yes No

EMERGENCY CONTACT INFORMATION:

Contact #3: Relationship: _____

Last Name: _____

First Name: _____

Home Ph: _____ Cell Ph: _____

Work Ph: _____ Email: _____

Can pick up?: Yes No Speaks English: : Yes No

Contact #5: Relationship: _____

Last Name: _____

First Name: _____

Home Ph: _____ Cell Ph: _____

Work Ph: _____ Email: _____

Can pick up?: Yes No Speaks English: : Yes No

(Other than Parents / Guardians)

Contact #4: Relationship: _____

Last Name: _____

First Name: _____

Home Ph: _____ Cell Ph: _____

Work Ph: _____ Email: _____

Can pick up?: Yes No Speaks English: : Yes No

Contact #6: OUT OF DISTRICT CONTACT

Relationship: _____

Last Name: _____

First Name: _____

Home Ph: _____ Cell Ph: _____

Work Ph: _____ Email: _____

SIBLING INFORMATION

Sibling #1 Relationship: _____

Name: _____

DOB: _____ Age: ____ Grade: ____ Gender: ____

School: _____

Sibling #3 Relationship: _____

Name: _____

DOB: _____ Age: ____ Grade: ____ Gender: ____

School: _____

Sibling #2 Relationship: _____

Name: _____

DOB: _____ Age: ____ Grade: ____ Gender: ____

School: _____

Sibling #4 Relationship: _____

Name: _____

DOB: _____ Age: ____ Grade: ____ Gender: ____

School: _____

Other Notes or Comments:

I verify that the information contained in this registration is accurate and complete.

Parent/Guardian Name (Please print): _____

Parent/Guardian Signature (if student is under 19): _____ Date _____

The information on this form is collected under the authority of the School Act, Sections 13 & 79; and may be used by the District for Ministry of Education reporting; demographic, enrolment, budget facility and operational analysis. It will be kept secure and confidential in accordance with the Freedom of Information and Protection of Privacy Act.

Network, Internet and Wi-Fi Access User Agreement Form for Students K – 12



The personal information on this form is collected by School District No. 75 (Mission) under the authority of the School Act. The information will be used for educational purposes. This information will be protected under the Freedom of Information and Protection of Privacy Act. Questions about the collection and use of this information should be directed to the Information and Privacy Coordinator, School District No. 75, 33046 4th Avenue, Mission, BC, V2V 1S5, 826-6286.

Student Section

Student Name: _____ Div: _____

School: _____ Grade: _____

I have read the *Internet & Wi-Fi Access for All Users of the School District Computer Network* policy and regulations and I agree to follow the rules and regulations in the policy. I understand that if I violate the rules, my account can be terminated and I may face other disciplinary measures.

Student Signature: _____ Date: _____

Parent or Guardian Section

Students under the age of 19 must also have the signature of a parent or guardian who has read this agreement.

As the parent or guardian of the above-named student, I have read the *Internet & Wi-Fi Access Agreement for All Users of the School District Computer Network Policy and Regulations* and agree to abide by the provisions therein. I understand that network services are intended for educational purposes.

In consideration of the privilege of using the MPSD.CA Network, I hereby release the district, its personnel and any institutions with which it is affiliated, from any and all claims and damages of any nature arising from my child's use of, or inability to use, the MPSD.CA Network, including, but not limited to claims that may arise from the unauthorized use of the system to purchase products or services.

I will instruct my child regarding any restrictions against accessing material that are in addition to the restrictions set forth in the District Student Acceptable Use Policy and Regulations. I will emphasize to my child the importance of following the rules for personal safety and understand that it is impossible for the School District No. 75 (Mission) to restrict access to all controversial materials, and I will not hold School District No. 75 (Mission) responsible for materials acquired via its networks.

I give permission for _____ (name of student) to access the SD75.MISSION Network and/or the Internet and/ or Wi-Fi and certify that the information contained in this form is correct.

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Name: _____

Home Address: _____ Phone: _____

This form will be retained at the office of the enrolling school of the student.

The Board of Education will set appropriate standards for users to access the MPSD Network, Internet, and Wi-Fi Access in order to perform work and studies. This use must not jeopardize operation of the School District Network or the reputation and/or integrity of the School District.

General Guidelines

Internet Usage

- Users must comply with all applicable laws and regulations and must respect the legal protection provided by copyright and licenses with respect to both programs and data.
- Internet usage must be able to withstand public scrutiny and/or disclosure. Sites should be accessed in accordance with the criteria established in the [Selection of Supplementary Learning Resource Materials Administrative Procedure #212](#).
- Sensitive information must not be transmitted via or exposed to Internet access.
- Internet usage must be consistent with professional conduct and not for personal financial gain.
- Users must not attempt to obscure the origin or any message or download material under an assumed Internet address.
- Administrators must ensure that all student users sign a [Network, Internet and Wi-Fi Access User Agreement Form for Students K -12](#) before access is allowed. Parents/guardians will be advised by the School District that they can withdraw their consent at any time.
- The Systems Administrator monitors the use of the School District network and will monitor selected network traffic at the request of School District administration or the Ministry of Education.

Responsibilities

Users

- Users are responsible for ensuring that their use of the MPSD Network, Internet and Wi-Fi is appropriate and consistent with this policy.
- Users with an Access Agreement completed are personally responsible for the security of their user account, if one is granted, as follows:
 - Passwords must not be disclosed to any other individual.
 - Responsible for all activity that occurs within their account.
 - Notifying the immediate supervisor, teacher or systems administrator immediately if a security problem is suspected.
- Users are responsible for informing a teacher, an administrator or the system administrator if they mistakenly access inappropriate information or receive any message that they feel to be inappropriate.
- Users are responsible for following virus protection procedures to avoid the spread of computer viruses.
- Users are responsible for checking their email on a regular basis and for deleting unwanted messages.

Administrators

- Administrators are responsible for ensuring that all students review this policy, the [Computer Network Administrative Procedure # 601](#) and [Internet Access for Students and Staff: Safe Practices Administrative](#)

[Procedure #107](#). These policies are to be reviewed annually with users and parents of students to ensure they are aware of their obligations and responsibilities.

- Administrators and supervisors are responsible for taking appropriate action when this policy is contravened.

Systems Administrator

- The District Systems Administrator is responsible for monitoring network usage in term of traffic/load.
- On an annual basis, the systems administrator will delete all non-renewed network access agreements (i.e. graduated students, students who do not have parental and/or school permission, students who have withdrawn, transferred, etc.).
- Students that leave the School District, will have their accounts disabled. Student's accounts will be purged and deleted at the end of each school year.
- Limited privacy is afforded to student personal files on the School District network through routine maintenance and monitoring of the system.
 - Pursuant to the School Act, parent(s)/guardian(s) have the right to view the contents of their student's files.
 - A search will be conducted if there is a reasonable suspicion that a student has breached the rules and regulations governing use of the MPSD.CA network, the [District Code of Conduct Policy #19](#), or the law.
- The School District will cooperate fully with law enforcement officials conducting an investigation into illegal activities related to student use of the MPSD.CA network.

Safe Practices

- The MPSD.CA network must not be used for any of the following. Engaging in any of these activities may be considered an illegal act and subject to an investigation by school and/or law enforcement officials.
 - transmitting any materials in violation of Canadian laws;
 - violating, or attempting to violate, the security of the district's computers, data or network equipment or services;
 - offering, providing or purchasing products or services;
 - political lobbying;
 - posting or linking personal and/or private information about themselves or other people. (See the Information and Privacy Act for a definition of *personal information*);
 - knowingly or recklessly posting false or defamatory information about a person or organization;
 - engaging in personal attacks, including prejudicial or discriminatory attacks;
 - using obscene, profane, lewd, vulgar, rude, inflammatory, threatening or disrespectful language at any time;
 - harassing another person;
 - posting chain letters or sending unnecessary messages (spamming) to a large number of people;
 - posting information that could cause damage or danger;
 - plagiarizing works found on the Internet;
 - accessing material that is profane or obscene (pornography), that advocates illegal acts, or that advocates violence or discrimination (hate literature);
 - pursuing unauthorized access or attempt to access another person's accounts, files or computer;
 - attempting to spread or create computer viruses, destroy data or disrupt the computer system in any way;
 - engaging in any act that contravenes the [District Code of Conduct Policy #19](#).

Administrative Procedure #210b

Network, Internet, and Wi-Fi Procedure for Students K – 12



Date Adopted: October 2001

Date Amended: April 2018

Definition:

- *“User” means students authorized to access the network, internet and Wi-Fi via a School District service provider and.*
- *“Internet” means the global interconnection of data networks that commonly use (but are not limited to) the Internet Protocol.*
- *“Sensitive Information” means personal, confidential or protected information whose release is unauthorized – i.e. information which is reasonably likely to be accepted or excluded from access under the Freedom of Information and Protection of Privacy Act.*
- *“Offensive material” includes, but is not limited to, pornography, hate literature or any material which contravenes the BC Human Rights Act.*

Cross Reference: [District Code of Conduct Policy #19](#)

[Internet Access for Students & Staff: Safe Practices Administrative Procedure #107](#)

[Selection of Supplementary Learning Resource Materials Administrative Procedure #212](#)

Photograph, Video, and Media Consent Form



School Districts must comply with the *Freedom of Information and Protection of Privacy Act* which sets out the privacy rights of individuals and provides regulations on protecting personal information for the public sector.

Mission Public Schools must have consent to collect, use, and publicly release photographs, videos, and audio of students.

Please complete the information below and return this form to your school.

Student names or images may be shared for the following purposes:

- 1. School yearbooks

| | |
|--------------------------|--|
| <input type="checkbox"/> | YES , I consent for the release of my child's personal information for the prescribed purpose outlined above. |
| <input type="checkbox"/> | NO , I do not consent for the release of my child's personal information for the prescribed purpose outlined above. |

- 2. School and / or school district website, newsletter, social media sites, or videotaping in the classroom and / or during special events for presentation purposes.

| | |
|--------------------------|--|
| <input type="checkbox"/> | YES , I consent for the release of my child's personal information for the prescribed purpose outlined above. |
| <input type="checkbox"/> | NO , I do not consent for the release of my child's personal information for the prescribed purpose outlined above. |

| |
|------------------------------------|
| Student Name: |
| School: |
| Parent/ Guardian Name: |
| Parent/ Guardian Signature: |
| Date: |

NOTE: Mission Public Schools does not have control over public events at which individuals voluntarily appear or attend, and external media is present.

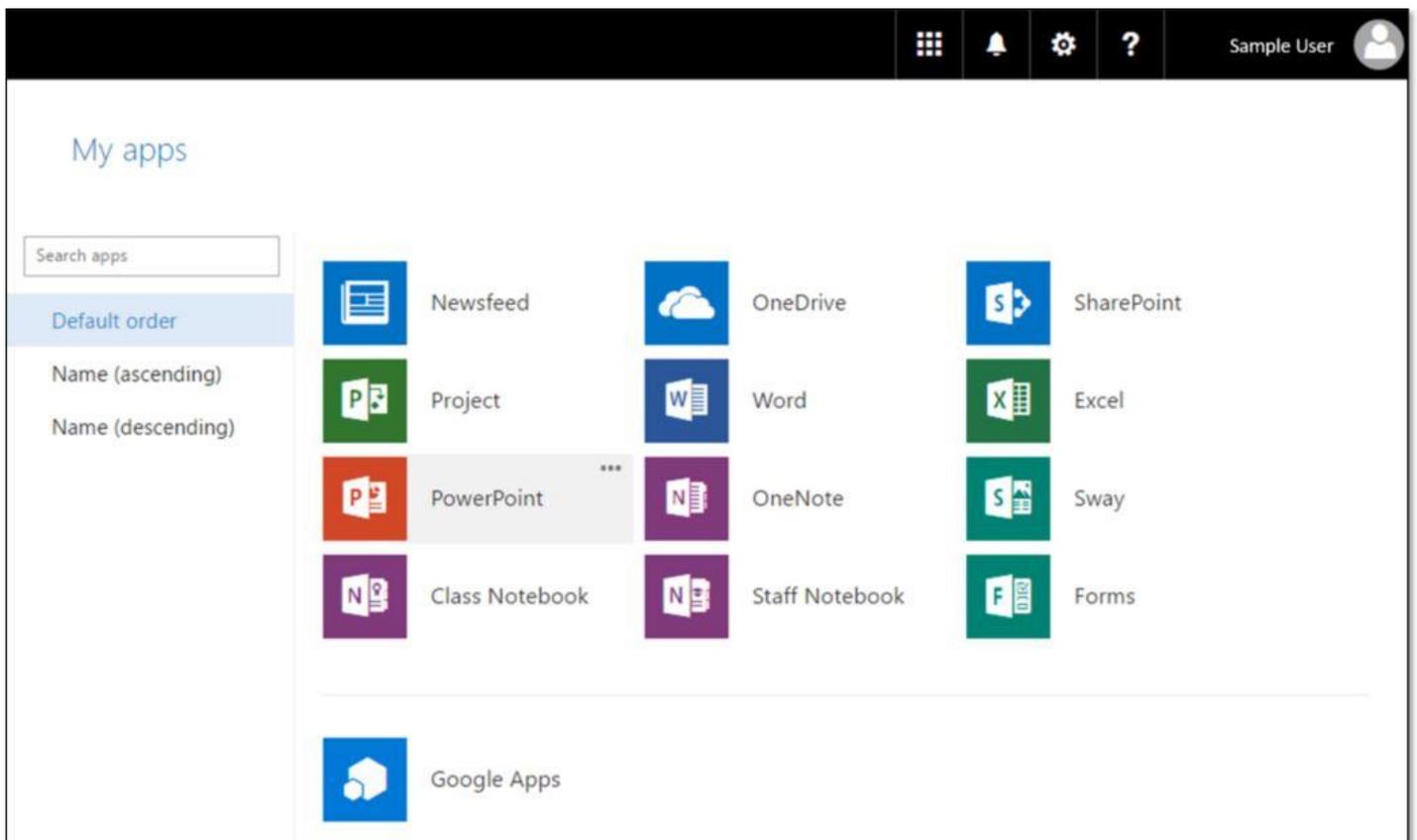
The information described above is collected in accordance with **Section 26 (c) (d) and (g)** of the *Freedom of Information and Protection of Privacy Act*. Mission Public Schools must seek consent to disclose personal information for the examples listed above. Questions and concerns should be directed to the School Principal or the District Privacy Coordinator.

This form was last revised: **January 31, 2018**

What is Office 365

Office 365 Education is a collection of services that allows you to collaborate and share your schoolwork. It's available for free to teachers who are currently working at an academic institution and to students* who are currently attending an academic institution. The service includes Office Online, and OneDrive online file storage. This service also allows teachers and students to install the full Office applications on up to **5 PCs or Macs for free.**

*Students **MUST** have parent permission granted for Office 365 via school policies on the following form to use this service each year.



Dear Parent/Guardian:

Albert McMahon Elementary School is going to be upgrading the Microsoft Office to Office 365. Students will be provided with personal user accounts to create and manage their school assignments.

As a school district, we are subject to the *BC Freedom of Information and Protection of Privacy Act*. This requires the school district to ensure families provide consent for educational digital resources. This is in accordance with s.26(c) of the *Freedom of Information and Protection of Privacy Act* (FOIPPA). Students' creations will be archived as an educational project under the authority of s.27(1)(a)(i) of FOIPPA and only accessible to the student who created it. In accordance with this Act, we must at all times protect the privacy of students under our care.

Mrs. Hardeep Grewal
32865 Cherry Avenue, Mission, BC V2V 2V1
604-826-0274

Consent:

Office 365 - I have read the above information from Albert McMahon Elementary School and understand that when implementing a web-based service we will be creating personal, private accounts for students. I understand that the objective of *Office 365* is to enable opportunities to create and manage school assignments. Students who are not granted permission by their parents will not be penalized and alternative assignments will be provided.

I consent to my child using *Office 365*.

By signing this Agreement, I on my own behalf or, as applicable, on behalf of my child, understand and agree that:

- Student's work in *Office 365* may be accessed by the student's teachers, school based administrator and you as the invited parent.

This consent will be considered valid **from the date at which it is signed**. I also hereby acknowledge that I have read and understood the above information on *Office 365*.

Print Name of student

Grade

Date

Signature of parent or guardian*:

Date

**For parents who have court orders describing their parental rights, this form should be signed by a parent who has the right to exercise the student's privacy protection rights.*

This form must be returned, signed and dated, to the student's school so that an *Office 365* account can be created.

Consent Form *All About Me*

Dear Parent/Guardian:

Albert McMahon Elementary School is going to be using All About Me as a Career Education Resource. Students will be provided with personal user accounts for career education purposes.

As a school district, we are subject to the *BC Freedom of Information and Protection of Privacy Act*. This requires the school district to ensure families provide consent for educational digital resources. This is in accordance with s.26(c) of the *Freedom of Information and Protection of Privacy Act* (FOIPPA). Students' creations will be archived as an educational project under the authority of s.27(1)(a)(i) of FOIPPA and only accessible to the student who created it. In accordance with this Act, we must at all times protect the privacy of students under our care.

Mrs. H. Grewal
Albert McMahon Elementary School
32865 Cherry Avenue, Mission BC V2V 2V1

Consent:

All About Me - I have read the above information from Elementary School and understand that when implementing a web-based service we will be creating personal, private accounts for students. I understand that the objective of *All About Me* is to enable opportunities to explore career education. Students who are not granted permission by their parents will not be penalized and alternative assignments will be provided. I also recognize that I may be invited to view my child's work in All About Me and as a guest I will be respectful of not sharing classroom photos that may be posted by my child.

I consent to my child using *All About Me*.

By signing this Agreement, I on my own behalf or, as applicable, on behalf of my child, understand and agree that:

- Student's work in *All About Me* may be accessed by the student's teachers, school based administrator and you as the invited parent.

This consent will be considered valid **from the date at which it is signed**. I also hereby acknowledge that I have read and understood the above information on the Use of *All About Me*.

Print Name of student

Grade

Date

Signature of parent or guardian*:

Date

**For parents who have court orders describing their parental rights, this form should be signed by a parent who has the right to exercise the student's privacy protection rights.*

This form must be returned, signed and dated, to the student's school so that an All About Me account can be activated for the student named above.



ALBERT MCMAHON ELEMENTARY SCHOOL

PARENT ASSOCIATION COMMITTEE (PAC)

The PAC needs you. We are in search of parents who wish to be a part of their child's education.

What does the Parent Advisory Committee Do?

We raise funds and provide school programs that help to enhance the experience of students and parents. The fundraisers generate extra funds for computers, smart boards and projects such as the community garden and outdoor learning space, etc.

Some of our most popular programs provided by PAC volunteers are: The Home Reading Club with monthly prizes, a pizza lunch and pancake breakfast; Popcorn Friday's; and our Hot Lunch Program, offering lunches generally once a week.

What will it do for you?

Keep you informed. Gives you information on the programs run during and after school hours. Gives you the knowledge in your child's education and what they are learning. Volunteering your time gives you resources to help your children in their education. You get to know your child's teacher and Principal.

We can accommodate your schedule. We are looking for a wide variety of help. You tell us what you are able to do and we can find the perfect job for you. If you are able to help every month for 1 hour, one week only, one event, one position for 1 year we are in need of you.

Please email Sharon Duff at albertmcmahonpac@gmail.com for further information.

Please sign below to provide permission for your contact information to be used by the PAC to contact you.

Parent Name: _____ Phone: _____

Email: _____

Child's Name(s): _____ Div. _____



Date: _____

We are pleased to announce that our school has been accepted into the BC School Fruit and Vegetable Nutritional Program (Administered by the BC Agriculture in the Classroom Foundation and supported by Healthy Families BC)

Our school is involved in a province-wide healthy living initiative. One of the goals is to encourage healthy eating by providing fresh BC fruits and vegetables to our students *during class time*. Our students will receive these healthy treats 12 times over the school year at **no charge!**

For students in grades K-5, there is also the option to have milk delivered along with the fruit and veggies, again, at **no charge**.

(A percentage of +Milk delivery will be fortified soy beverage for people with lactose sensitivities)

To ensure every student's health and safety please return this reverse consent form

ONLY

If you do **NOT** wish your child to participate

AND/OR

If you need to alert us to certain **FOOD ALLERGIES**.

Student's Name: _____

Teacher's Name: _____

Grade: _____

NO I do not wish my child to participate in the BC School Fruit and Vegetable Program +Milk (as applicable)

MEDICAL ALERT My child has food allergies you need to be aware of and therefore he/she may not be able to participate in every offering. To assist you, below is information on my child's "allergy profile".

Please list allergy(s) and define allergy profile(s):

For Example:

- It is airborne
- It is by ingestion only
- It can be contracted through touch – the skin.

If you need further guidance in this area, please contact me at: _____

Parent/Guardian's Name: _____
(please print)

Signature: _____

Fast. Safe. Convenient.

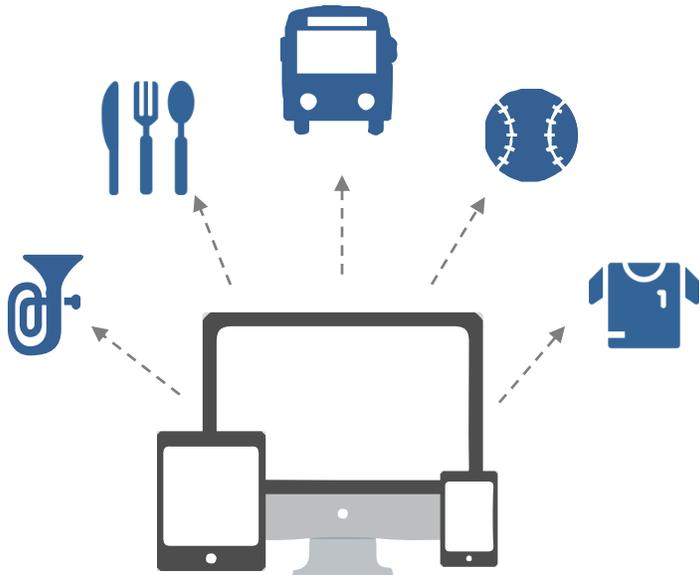
Welcome to *School Cash Online*

School Cash Online is an online parent portal that offers a safe, fast and convenient way to pay for school activity fees. The portal is customized to meet your school's needs and allows you as a parent, to add your students, make payments, check current balance/account history, print or view receipts, and receive notifications about upcoming events.

Why Use School Cash Online?

With School Cash Online, you can pay all your student's school fees with the click of a button. Wherever. Whenever. Trips to the school to drop-off cash or sending your student with money will be a thing of the past. School Cash Online also enables you to keep track of your student's school items and activities.

Purchase these items and more online.



Credit Card

Pay with Visa or MasterCard on School Cash Online by entering your credit card number, CVV number (the three digits on the back of your card), card expiry date, and billing information.



eCheck

An electronic version of a paper check used to make payments online. Anyone with a checking or savings account can pay by eCheck through School Cash Online.



myWallet

An online wallet that can be loaded to hold funds and pay for your child's fees on School Cash Online. myWallet also allows you to allocate funds to pay for school fees at a later date, as you would with a gift card.

How to Register

Follow these instructions to create your School Cash Online account today.

- 1 **Create Your Profile:**
Go to <https://mpsd.schoolcashonline.com> and click on "Get Started Today".
- 2 **Confirm Your Email:**
Check your inbox for the email confirmation and click on the link inside. Sign in with your new login details.
- 3 **Add a Student**
Click "Add Student" and fill in the required fields with your child's details.

Stay connected by selecting "Yes" to email notifications about upcoming fees.

- I want to receive email notifications for new fees assigned to my student and updates on school-related activities.



For more information contact Parent Helpdesk at
parenthelp@schoolcashonline.com or 1.866.961.1803

SchoolCashOnline

For safety and efficiency reasons Mission Public School District would like to reduce the amount of cash & checks coming into our school. Please join the thousands of parents who have already registered and are enjoying the convenience of paying ONLINE! It takes less than 5 minutes to register. Please follow these step-by-step instructions, so you will begin to receive email notifications regarding upcoming events involving your child(ren).

NOTE: If you require assistance, select the *SUPPORT* option in the top right hand corner of the screen.

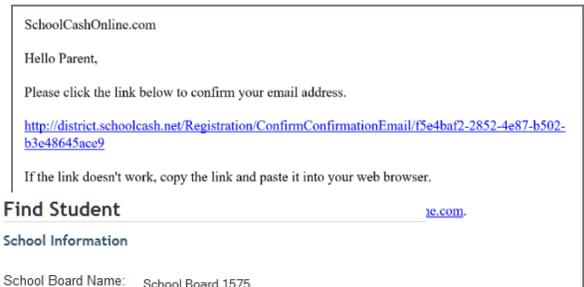
Step 1: Register

- If you have not registered, please go to the *School Cash Online* home page <https://mpsd.schoolcashionline.com/> and select the **"Get Started Today"** option.
- Complete each of the three Registration Steps
 *For Security Reasons your password, requires **8 characters**, **one uppercase** letter, **one lowercase** letter and a **number**.



Step 2: Confirmation Email

A registration confirmation email will be forwarded to you. Click on the link provided inside the email to confirm your email and *School Cash Online* account. The confirmation link will open the *School Cash Online* site prompting you to sign into your account. Use your email address and password just created with your account.



Step 3: Find Student

This step will connect your children to your account.

- Enter the School Board Name.
- Enter the School Name.
- Enter Your Child's Student Number, Last Name and Birth Date.
- Select **Continue**.
- On the next page confirm that you are related to the child, check in the Agree box and select **Continue**.
- Your child has been added to your account.

Find Student [e.com](#)

School Information

School Board Name: School Board 1575
 Looking for a student in a different school board? 

School Name: 

Student Information

Do you have the student number?

Student Number:

First Name:

Last Name:

Birth Date:
Date format: mm/dd/yyyy

(No students? [Click here](#)) o one

Step 4: View Items or Add Another Student

If you have more children, select **"Add Another Student"** and repeat the steps for each parent account. If you do not wish to add additional children, select **"View Items For Students"** option. A listing of available items for purchase will be displayed.