HIGHLIGHTS FROM POLICIES

Dear Parent

You will be sent all the school policies after the child is formally enrolled in school. However, we would like to share few highlights from those policies:

1. Board, Teachers, and other staff of the CanAsia School, including every student and employee, are entitled to a respectful work, and learning environment that is:
   (a) Free from Discrimination and provides for Reasonable Accommodation.
   (b) Free from Harassment; and
   (c) Collegial and conducive to early resolution of conflict between employees and students of the CanAsia School.

2. Staff and other persons shall: Treat and discipline students with courtesy, respect, consistency, and fairness.

3. Parents shall follow the **school website** and links to always connect with school including but not limited to Absent Submission, Pick-up and drop off and other concerns.

4. **Students shall**: Develop self-discipline, attend school in school uniform, demonstrate behaviour that contributes to an orderly, supportive, and safe learning environment. Attend school regularly and punctually, come to class on time with all necessary materials, e.g., texts, pens, notebooks, etc., complete assignments and handing them in on time.

5. **Parent(s)/Guardian(s) are encouraged and/or expected to**:
   1. Ensure regular and punctual attendance and encourage completion of all school assignments by their children
   2. Attend school meetings and events, and support the school
   3. Maintain open communication with staff by addressing concerns through proper lines of communication
   4. Treat all staff with dignity and respect.
   5. Assist their children to establish positive attitudes towards achievement as well as respect for peers, school personnel and property

6. **Disciplinary action** can be taken against the student should he/she fail to comply with school guidelines and policies which might lead to temporary and permanent suspension from school.

7. **Transportation** is provided for by the school. School ensures a timely and safe travel for students to and from school. During January and February, there are interruptions due to winter weather. Parents are expected to have patience during those unprecedented times.

8. **Parents are encouraged to read all the attached policies for more details.**

REGISTRATION FORM

For OFFICE USE ONLY	
SR No. _____	GRADE: _____

STUDENT INFORMATION

AS PER BIRTH CERTIFICATE

First name: _____ Middle name: _____ Last name: _____

Date of birth:_____ Gender: _____ Birth Country: _____

Status of Child: Citizen☐ PR☐ Parent on Work/Study Permit☐

Date the student will be sent to CanAsia School: _____

Last School Attended : _____

STUDENT ADDRESS

Apt./St. no.# _____ Winnipeg, MB _____

PRIMARY CONTACT INFORMATION

Primary Email: _____ Phone no.: _____ Alternate no. _____

PARENT INFORMATION

FATHER: First name: _____ Middle name: _____ Last name: _____

MOTHER: First name: _____ Middle name: _____ Last name: _____

Apt./St. no.# _____ Winnipeg, MB _____

EMERGENCY CONTACTS

First name: _____ Middle name: _____Last name: _____

Relationship: _____ Phone no.: _____ Email: _____

Apt./St. no.# _____ Winnipeg, MB _____

IS THIS PERSON ALLOWED STUDENT CARE IN ABSENCE OF THE PARENTS: YES ☐ NO ☐

SIBLINGS

Name: _____ Birthdate: _____ Sex: _____ School: _____

Name: _____ Birthdate: _____ Sex: _____ School: _____

This personal information is being collected under the authority of the Public School's Act and will be used for educational purposes. It is protected by the Personal Information Protection and Electronic Documents Act (PIPEDA). This information is protected and will be shared with CANASIA SCHOOL only.

Are there any significant home conditions that may affect the child's adjustment and performance? Please explain:
(e.g.: Re-marriage, death, language, other conditions)

_____

LEGAL CUSTODY OF THE CHILD: PLEASE PROVIDE LEGAL DOCUMENTS TO THE SCHOOL

Shared custody: YES ☐ NO ☐ Primary person caring for the child: _____

MEDICAL INFORMATION

Name of Doctor: _____Phone number: _____ PHIN: 9-digit: _____

Health concerns/Allergies: _____

Additional Health Concerns: Please indicate all the health care needs that apply to the child:

Asthma YES ☐ NO ☐ Bleeding disorder YES ☐ NO ☐ Cardiac condition YES ☐ NO ☐

Anaphylaxis YES ☐ NO ☐ Life threatening allergy (child is prescribed an **EpiPen**)

Diabetes YES ☐ NO ☐ TYPE: _____ Seizure Disorder YES ☐ NO ☐

Is your child currently taking physician prescribed medication? If YES, please provide details:

_____

Please provide details of, if any, other significant physician diagnosed condition.

_____

PROVIDE THE FOLLOWING DOCUMENTS AT THE TIME OF REGISTRATION

1. **Copy of BIRTH CERTIFICATE**
2. **Copy of Status Document: PR or CIT Card**
3. **Copy of most recent REPORT CARD**
4. **Administration and Registration fee**
   (chargeable every year/non refundable)

I acknowledge and confirm that I have read all the policies and will abide by them throughout the school year.

_____
Parent Signature

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INFORMED CONSENT

Name of the student:

1. Publish or Display Student Work

Our school would like to share information and communicate with parents/guardians by highlighting the school, students and student work or activities in a variety of publications and/or Division organized or sponsored event. The following are examples only and not meant to be an inclusive list of how student information and work may be published or shown:

- students and their displays during school sponsored open houses, professional development sessions.
- students in other school related activities held at the school, school division sites or at school or school division sponsored events.
- division publications, or school publications, which are posted to the school or Winnipeg School Division controlled website.
- or posting or publishing on the school or Winnipeg School Division controlled social media platforms.

Please note: Video and photographs of students posted to the school-controlled websites and social media platforms may identify students by name.

2. Video graphing/Photos/Media

Many positive things take place in the school and we would like to share this good news with the broader community by inviting journalists and other members of the media to visit our schools. Photographs, videotaping, or interviews are allowed at schools only with the permission of the principal or vice-principal. In certain cases, an activity/behaviour of a student can be videotaped for record of the school and parents.

3. Emails

The school will transmit electronically any newsletter, school updates and announcements regarding school activities, including fundraising and promotions.

4. Injuries

a. I understand that mild injuries/small cuts/bruises, occurred while in school, during playing/field trips, requiring first aid will be dealt only at school level. Parents will only be informed if any further medical care is required/needed.
b. I understand that the school may report any injury requiring further medical care in 24 hours of occurrence of injury.
c. I understand that in case of injuries requiring emergency medical care, 911 will be called and I will be responsible for any payments thereof.
d. I accept that school/staff/students will not be held liable for injury happened while playing, in bus/van or on field trips during school hours.

5. Behaviour

I understand that a behavior of the student can be photographed/videotaped without consent. I further understand that I have read the Code of Conduct Policy, per Unacceptable Behavior, 2(e) specifically and in the entirety of the policy, the child can be expelled from the school at any time of the year. I being the parent will remain respectful to all school staff.

6. Fee Changes

I understand that if the child is on vacation, the tuition AND transportation fee will be charged as regular.

By signing this consent form, the parent/guardian agrees to all the above terms.

Parent/Guardian (please print): _____ Signature: _____

Date: _____

APPLICATION FORM
TO AVAIL TRANSPORTATION

Name of the Student	Grade	Pick up Address	Drop off Address (If different from Pick up Address)

SIGNED DECLARATION

I request transportation service for the following number of child(ren) _____ as detailed above.

I declare that the information given above is correct and true to the best of my knowledge.

SIGN: _____ (Parent or Guardian) Phone No: _____

Address: _____

Date: _____

Please return the completed Application Form should you want to avail transportation.

Please be advised that transportation is not guaranteed.

Address change during the school year, may effect transportation. SEE POLICY

Pick up and Drop off times can vary from:
7am to 8:30am AND 4pm to 5:15pm