



This form is a legal document. It must be completed in its entirety by a legal guardian or parent for each Kindergarten to grade 12 student registering in a school in The Calgary Board of Education. The information for each legal guardian, including custodial parents, must be included on this form. The Declaration must be signed in front of school personnel. Please bring (government issued) photo identification. You may be asked to provide documentation confirming guardianship. Please print.

### Dependent Student

Legal Last Name: \_\_\_\_\_ Grade Entering: \_\_\_\_\_  
Legal First Name: \_\_\_\_\_ CBE Student ID Number (if known): \_\_\_\_\_  
Legal Middle Name: \_\_\_\_\_ Alberta Education ID Number (if known): \_\_\_\_\_

### Resident / Non-Resident of The Calgary Board of Education (CBE)

Under the *Education Act*, a student is considered a resident of CBE if at least one of the legal guardians / parents with day-to-day care of the student resides in the boundaries of CBE and at least one of them is NOT of the Roman Catholic faith. For more information, refer to **Boundaries of CBE** at the end of this document. For non-resident children under the age of 6, refer to **Early Childhood Services** at the end of this document.

By signing below, I declare that (check one):

- ☐ all legal guardians / parents with day-to-day care of the student identified on this form, do **not** reside within CBE boundaries  
☐ at least one legal guardian / parent with day-to-day care of the student identified on this form, resides within CBE boundaries

and (check one):

- ☐ all legal guardians / parents with day-to-day care of the student identified on this form, are of the Roman Catholic faith  
☐ at least one of the legal guardians / parents with day-to-day care of the student identified on this form, is **not** of the Roman Catholic faith

Print Legal Guardian / Parent Name

Signature Legal Guardian / Parent

Date (MM/DD/YYYY)

### Student Name and Address

For acceptable identification, refer to **Proof of Age, Legal Name and Citizenship** at the end of this document.

Preferred Last Name: \_\_\_\_\_ Preferred First Name: \_\_\_\_\_

Birth Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender: ☐ Female ☐ Male ☐ Another: \_\_\_\_\_  
MM DD YYYY (Optional)

Student Mobile Phone (only high school students): \_\_\_\_ - \_\_\_\_

Student Personal Email Address for Alberta myPass (students 13 or older): \_\_\_\_\_

Provide the address of the legal guardian / parent where the student lives full time. If the student lives with legal guardians that do not live together, the legal guardians must choose one address to use as the primary student residence.

Apt / Suite #: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Community (in Calgary): \_\_\_\_\_

### Office Use Only

Name of School: \_\_\_\_\_ Program: \_\_\_\_\_ Lottery/Draw: ☐ Yes ☐ No

Expected Start Date (MM/DD/YYYY): \_\_\_\_\_ Kindergarten: ☐ Full Day (FD) ☐ FD Alternating ☐ Half Day

Proof of Address Document: \_\_\_\_\_ Proof of Age & Legal Name Verified: ☐ Yes ☐ No

Entered by: \_\_\_\_\_ Date Entered (MM/DD/YYYY): \_\_\_\_\_ Resident of CBE: ☐ Yes ☐ No

## Student Citizenship

Birth Country: \_\_\_\_\_ Primary Language Spoken at Home: \_\_\_\_\_

All Languages Spoken in the Home: \_\_\_\_\_

Student is a Canadian Citizen: ☐ Yes ☐ No

If Canadian Citizen, name of Canadian document (e.g., birth certificate, passport, Canadian Citizenship Certificate):

If **not** Canadian Citizen, name of document (e.g., Permanent Resident, Refugee Claimant, Temporary Resident, Child of Canadian Citizen, Child of a lawfully admitted permanent or temporary resident):

Effective Date of Document: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
MM DD YYYY

Expiry Date of Document: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
MM DD YYYY

## Student Medical Information

If the student's attendance at school may be affected by an existing medical or physical condition, it is your responsibility to complete and submit the *Student Health Plan* form to the school.

Does the student have any medical or physical conditions that may affect their attendance at school? ☐ Yes ☐ No

Does the student have any life-threatening allergies? ☐ Yes ☐ No

If **yes** to either of the above questions, give a brief description:

Has the *Student Health Plan* form been completed and submitted to the school? ☐ Yes ☐ No

## Francophone Eligibility

The exercise of Francophone eligibility rights refers to instruction in a Francophone school, NOT a French Immersion school. According to the *Education Act* and Section 23 of the *Canadian Charter of Rights and Freedoms*, a student is eligible for instruction in a Francophone school if at least one parent is a Canadian citizen and one of the following three conditions exists:

- either parent's first language learned and still understood is French;
- either parent has received their primary school instruction in Canada in French; or
- one or more of the parent's children has received or is receiving primary or secondary instruction in French in Canada.

Does your child have Francophone eligibility? ☐ Yes ☐ No

If **yes**, and you wish to exercise your right, please contact the Conseil Scolaire FrancoSud at 403-686-6998.

The Alberta *Student Records Regulations* requires that, if requested, The Calgary Board of Education provide the name, address, date of birth and gender of Section 23 eligible students to the Francophone School District as well as the name, address and telephone number of the student's parent.

## Aboriginal Self-Identification (optional)

If you wish to declare the student as Aboriginal, please select one:

☐ First Nation (status) ☐ First Nation (non-status) ☐ Métis ☐ Inuit

For further information, refer to <https://www.alberta.ca/first-nations-metis-or-inuit-student-self-identification.aspx> or contact Alberta Education at 780-427-8501 (dial 310-0000 first to be connected toll-free from anywhere in Alberta).

If you have questions regarding the collection of student information by the school board, please contact The Calgary Board of Education's Education Director in care of the Indigenous Education Team at [IndigenousEducation@cbe.ab.ca](mailto:IndigenousEducation@cbe.ab.ca).

### Previous School Information

Has the student *ever* registered in a school in The Calgary Board of Education (CBE)? ☐ Yes ☐ No

If **yes**, provide:

Name of CBE School: \_\_\_\_\_

Grade Completed: \_\_\_\_\_ Withdrawal Date (MM/DD/YYYY): \_\_\_\_\_

Has the student attended school elsewhere (including with an Early Childhood provider)? ☐ Yes ☐ No

If **yes**, provide:

Name of the Last School Attended: \_\_\_\_\_

Name of School Contact: \_\_\_\_\_

Grade Completed: \_\_\_\_\_ Withdrawal Date (MM/DD/YYYY): \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Was the student suspended or expelled? ☐ Yes ☐ No

Address of School: \_\_\_\_\_

School Phone: \_\_\_\_\_ School Fax: \_\_\_\_\_

### Student Learning Needs

Has the student *ever* had an Individual Program Plan (IPP), Individual Education Plan (IEP) or a learning, medical or mental health assessment that has provided recommendations to support the student's learning? ☐ Yes ☐ No

If **yes**, provide the school with the learning, medical or mental health assessment document (e.g., psycho-educational assessment, physician letter).

If **yes** and from **inside Alberta**, provide a description and if known, the Alberta Education special education code(s).

If **yes** and from **outside Alberta**, provide a description and if known, the special education code(s).

Has the student *ever* been in a special education program/class or unique setting in CBE or elsewhere? ☐ Yes ☐ No

If **yes**, provide the name of the program/class or setting, and if not from CBE, provide a description.

Are there any language needs or other unique learning needs we should know in order to support the student's learning?

### Legal Guardians / Parents / Others

If there is more than one Legal Guardian, include the information for *each* guardian on this form whether the guardians live together or not.

A legal guardian may be a parent or other person who is legally responsible for the well-being of the child and makes important decisions for the child. Legal guardian is defined in section 1(1)(2) of the *Education Act*.

For more information, refer to the **Relationship** and **Custody and Guardianship Documents** at the end of this document.

Set the phone preferences using the 'Call Order'. Select 1 for the preferred phone number.

**Please provide a minimum of TWO emergency contacts.** They may be legal guardians, non-legal guardians or a combination of both.

A description of the **Release of Information Form** referred to in the NOT Legal Guardian / Others section is at the end of this document.

## Legal Guardian

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_ Language interpretation requested: ☐ Yes ☐ No

Lives with Student: ☐ Yes ☐ No Same Address as Student: ☐ Yes ☐ No

**Emergency Contact:** ☐ Yes ☐ No Contact Order (assign a priority level): ☐ 1<sup>st</sup> ☐ 2<sup>nd</sup> ☐ 3<sup>rd</sup> ☐ 4<sup>th</sup> ☐ 5<sup>th</sup> ☐ 6<sup>th</sup>

Legal Guardians / Parents Live Together: ☐ Yes ☐ No If **yes**, skip to Home Phone.

Custody: ☐ Sole Custody / Parenting ☐ Joint / Shared Custody / Parenting ☐ Delegation of Authority ☐ Decision Making

Court Order: ☐ Yes ☐ No If **yes**, a copy must be provided for the student record.

Emergency Protection Order: ☐ Yes ☐ No If **yes**, a copy must be provided for the student record.

If there are **no** court documents, a brief written summary of the current family status is required:

Home Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Call Order (preference): ☐ 1 ☐ 2 ☐ 3

Work Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Ext. \_\_\_\_\_ Call Order (preference): ☐ 1 ☐ 2 ☐ 3

Mobile Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Call Order (preference): ☐ 1 ☐ 2 ☐ 3

Email Address: \_\_\_\_\_

<b>Home Address:</b> Apt / Suite #: _____	<b>Mailing Address:</b> Apt / Suite #: _____
Street: _____ City: _____	Street: _____ City: _____
Province: _____ Postal Code: _____	Province: _____ Postal Code: _____
Home Community (in Calgary): _____	

## Legal Guardian

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_ Language interpretation requested: ☐ Yes ☐ No

Lives with Student: ☐ Yes ☐ No Same Address as Student: ☐ Yes ☐ No

**Emergency Contact:** ☐ Yes ☐ No Contact Order (assign a priority level): ☐ 1<sup>st</sup> ☐ 2<sup>nd</sup> ☐ 3<sup>rd</sup> ☐ 4<sup>th</sup> ☐ 5<sup>th</sup> ☐ 6<sup>th</sup>

Legal Guardians / Parents Live Together: ☐ Yes ☐ No If **yes**, skip to Home Phone.

Custody: ☐ Sole Custody / Parenting ☐ Joint / Shared Custody / Parenting ☐ Delegation of Authority ☐ Decision Making

Court Order: ☐ Yes ☐ No If **yes**, a copy must be provided for the student record.

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Work Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Ext. \_\_\_\_\_ Call Order (preference): ☐ 1 ☐ 2 ☐ 3

Mobile Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Call Order (preference): ☐ 1 ☐ 2 ☐ 3

Email Address: \_\_\_\_\_

<b>Home Address:</b> Apt / Suite #: _____	<b>Mailing Address:</b> Apt / Suite #: _____
Street: _____ City: _____	Street: _____ City: _____
Province: _____ Postal Code: _____	Province: _____ Postal Code: _____
Home Community (in Calgary): _____	

**Legal Guardian**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_ Language interpretation requested: ☐ Yes ☐ NoLives with Student: ☐ Yes ☐ No Same Address as Student: ☐ Yes ☐ No**Emergency Contact:** ☐ Yes ☐ No Contact Order (assign a priority level): ☐ 1<sup>st</sup> ☐ 2<sup>nd</sup> ☐ 3<sup>rd</sup> ☐ 4<sup>th</sup> ☐ 5<sup>th</sup> ☐ 6<sup>th</sup>Legal Guardians / Parents Live Together: ☐ Yes ☐ No If **yes**, skip to Home Phone.Custody: ☐ Sole Custody / Parenting ☐ Joint / Shared Custody / Parenting ☐ Delegation of Authority ☐ Decision MakingCourt Order: ☐ Yes ☐ No If **yes**, a copy must be provided for the student record.Emergency Protection Order: ☐ Yes ☐ No If **yes**, a copy must be provided for the student record.If there are **no** court documents, a brief written summary of the current family status is required:

Home Phone: \_\_\_\_\_

Call Order (preference): ☐ 1 ☐ 2 ☐ 3

Work Phone: \_\_\_\_\_ Ext. \_\_\_\_\_

Call Order (preference): ☐ 1 ☐ 2 ☐ 3

Mobile Phone: \_\_\_\_\_

Call Order (preference): ☐ 1 ☐ 2 ☐ 3

Email Address: \_\_\_\_\_

**Home Address:** Apt / Suite #: \_\_\_\_\_**Mailing Address:** Apt / Suite #: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Community (in Calgary): \_\_\_\_\_

**NOT Legal Guardian / Others (e.g., stepparent, babysitter, interpreter, probation officer)**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_ Lives with Student: ☐ Yes ☐ No**Emergency Contact:** ☐ Yes ☐ No Contact Order (assign a priority level): ☐ 1<sup>st</sup> ☐ 2<sup>nd</sup> ☐ 3<sup>rd</sup> ☐ 4<sup>th</sup> ☐ 5<sup>th</sup> ☐ 6<sup>th</sup>Permission to Pick Up Student from School (if emergency contact, "Yes" must be checked): ☐ Yes ☐ NoRelease of Information Form (only needed if giving this person access to your child's information): ☐ Yes ☐ NoIf **yes**, has the form been discussed and signed by both certificated school staff and legal guardian / parent? ☐ Yes ☐ No

Home Phone: \_\_\_\_\_

Call Order (preference): ☐ 1 ☐ 2 ☐ 3

Work Phone: \_\_\_\_\_ Ext. \_\_\_\_\_

Call Order (preference): ☐ 1 ☐ 2 ☐ 3

Mobile Phone: \_\_\_\_\_

Call Order (preference): ☐ 1 ☐ 2 ☐ 3**NOT Legal Guardian / Others (e.g., stepparent, babysitter, interpreter, probation officer)**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_ Lives with Student: ☐ Yes ☐ No**Emergency Contact:** ☐ Yes ☐ No Contact Order (assign a priority level): ☐ 1<sup>st</sup> ☐ 2<sup>nd</sup> ☐ 3<sup>rd</sup> ☐ 4<sup>th</sup> ☐ 5<sup>th</sup> ☐ 6<sup>th</sup>Permission to Pick Up Student from School (if emergency contact, "Yes" must be checked): ☐ Yes ☐ NoRelease of Information Form (only needed if giving this person access to your child's information): ☐ Yes ☐ NoIf **yes**, has the form been discussed and signed by both certificated school staff and legal guardian / parent? ☐ Yes ☐ No

Home Phone: \_\_\_\_\_

Call Order (preference): ☐ 1 ☐ 2 ☐ 3

Work Phone: \_\_\_\_\_ Ext. \_\_\_\_\_

Call Order (preference): ☐ 1 ☐ 2 ☐ 3

Mobile Phone: \_\_\_\_\_

Call Order (preference): ☐ 1 ☐ 2 ☐ 3

**NOT Legal Guardian / Others (e.g., stepparent, babysitter, interpreter, probation officer)**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_ Lives with Student: ☐ Yes ☐ No

**Emergency Contact:** ☐ Yes ☐ No Contact Order (assign a priority level): ☐ 1<sup>st</sup> ☐ 2<sup>nd</sup> ☐ 3<sup>rd</sup> ☐ 4<sup>th</sup> ☐ 5<sup>th</sup> ☐ 6<sup>th</sup>

Permission to Pick Up Student from School (if emergency contact, "Yes" must be checked): ☐ Yes ☐ No

Release of Information Form (only needed if giving this person access to your child's information): ☐ Yes ☐ No

If **yes**, has the form been discussed and signed by both certificated school staff and legal guardian / parent? ☐ Yes ☐ No

Home Phone: \_\_\_\_\_ Call Order (preference): ☐ 1 ☐ 2 ☐ 3

Work Phone: \_\_\_\_\_ Ext. \_\_\_\_\_ Call Order (preference): ☐ 1 ☐ 2 ☐ 3

Mobile Phone: \_\_\_\_\_ Call Order (preference): ☐ 1 ☐ 2 ☐ 3

**Sibling Information (optional)**

Siblings can be connected in the student information system. If you wish to, please provide the other children's CBE school information.

Name: _____	CBE School: _____	Grade: _____
Name: _____	CBE School: _____	Grade: _____
Name: _____	CBE School: _____	Grade: _____
Name: _____	CBE School: _____	Grade: _____

**Declaration**

This Declaration must be signed in front of school personnel. Please bring (government issued) photo identification. You may be asked to provide documentation confirming guardianship.

I, the undersigned, hereby represent that I have the legal authority to register the student identified on this form. I have identified **all** legal guardians / parents for the student. I declare the information that I have provided on this form is complete and accurate.

**I will immediately notify the school of any changes to the information on this form.**

\_\_\_\_\_  
**Print** Legal Guardian / Parent Name

\_\_\_\_\_  
**Print** Staff Witness Name

\_\_\_\_\_  
**Signature** Legal Guardian / Parent

\_\_\_\_\_  
**Signature** Staff Witness

\_\_\_\_\_  
**Date** of Signature (MM/DD/YYYY)

\_\_\_\_\_  
**Date** of Signature (MM/DD/YYYY)

**Freedom of Information and Protection of Privacy**

The personal information requested on this form is collected under the authority of Alberta's *Freedom of Information and Protection of Privacy (FOIP) Act*, the *Education Act* and its regulations, and the *Canadian Charter of Rights and Freedoms*, Section 23. This information will be used for the maintenance of the student's record, for a school board's obligation to provide students with an education program that meets their needs, to provide a safe and secure school environment and other purposes that relate directly to and are necessary for an operating program or activity, including program placement, determination of eligibility and/or suitability for provincial or federal funding, contact and health related information in the event of problems or emergencies. Personal information may also be provided to the Minister of Education for the purpose of carrying out programs, activities, or policies under their administration (e.g., research, statistical analysis). This information will be treated in accordance with the privacy protection provisions of the *FOIP Act*.

If you have any questions about this form, please contact the school.

## Boundaries of CBE

- **North** | 144 Avenue N.W. east to Carringvue Manor N.W. alignment (to the south), north to northern boundary of Livingston community (north limit of Section 4, Township 26, Range 1, Meridian 5), east to 6 Street N.E., south to 144 Avenue N.E., east on 144 Avenue N.E. to 84 Street N.E.
- **East** | 84 Street N.E., east on Memorial Drive alignment, 100 Street S.E., east on northern boundary of Mountain View Cemetery alignment, Range Road 284, 17 Avenue S.E., 84 Street S.E., south to 146 Avenue S.E., east to 88 Street S.E., 88 Street S.E.
- **South** | Bow River west to Deerfoot Trail S.E., follow Deerfoot Trail S.E. south to city limits, west to Macleod Trail S.E., Macleod Trail S.E., north to alignment with 210 Avenue S.E. (to the west), west (following creek) along to 210 Avenue S.E., becoming 210 Avenue S.W., to alignment with Silverado Plains Circle S.W. (to the north), north to 194 Avenue S.W., west on 194 Avenue S.W. to Spruce Meadows Way S.W., north on Spruce Meadows Way S.W. to alignment with Silverado Skies Drive S.W. (to the east), west to alignment with Bridleridge Road S.W. (to the north), south to alignment with 186 Avenue S.W. (to the west), 186 Avenue S.W. to city limits, city limits west to 85 Street S.W.
- **West** | 85 Street S.W. north to 146 Avenue S.W., east to 37 Street S.W., 37 Street S.W. north through Glenmore Park back to 37 Street S.W., north to the Glenmore Trail S.W., Glenmore Trail S.W. west and follow city limits to 101 Street S.W., north to 2 Avenue S.W. alignment, west along the south boundary of Crestmont community and north along the west boundary of Crestmont community, Trans Canada Highway, west boundary of Valley Ridge community, N.W. along Bow River, Bearspaw Village Lane alignment, city limit, north boundary of Haskayne community, north on Twelve Mile Coulee Road N.W. (excludes Lynx Ridge) to Country Hills Blvd N.W., Country Hills Blvd N.W. east to Rocky Ridge Road N.W., follow Rocky Ridge Road N.W. north to 144 Avenue N.W.

Supplied by: Planning, February 2021

## Early Childhood Services

Children may be enrolled in any Early Development Centre (EDC) preschool or Kindergarten program in CBE. Schools follow the priorities listed in [Administrative Regulation 6090 | Child and Student Registration and Admission](#), section 6(9), to determine who may be enrolled. However, enrolment in an early childhood services program **does not** guarantee enrolment for grade one in the school or CBE. Priority will be given to CBE resident students living in the designated attendance area for the school.

## Proof of Age, Legal Name and Citizenship

The original document must be provided to the school. The school will make the copy.

The legal guardian / parent must produce the student's Canadian birth certificate at the time of registration. If a Canadian birth certificate is not available, the school may accept a:

- Canadian passport;
- Canadian Citizenship Certificate or Card;
- Canadian Certificate of Indian Status Card; or
- Canadian court order that states the legal name and age or date of birth of the child (e.g. Alberta adoption order). However, this document will not be accepted as proof of citizenship and further documentation will be needed.

The school can **not** accept a:

- document from another country;
- Canadian federal government Record of Landing; or
- Canadian federal government Permanent Resident Card, Permanent Resident Record or Confirmation of Permanent Residence.

A legal guardian / parent who cannot show proof of the student's Canadian citizenship must register the student through CBE Welcome Centre. For more information visit [www.cbe.ab.ca/welcome](http://www.cbe.ab.ca/welcome) or call 403-817-7789.

### *Exception – Students in Shelters*

If the legal guardian / parent does not have one of the documents listed above, they will provide a written summary of current family status until documentation can be provided. The legal guardian / parent is to apply to the government to acquire the required document. Shelter staff can help with this. If applicable, the legal guardian / parent will provide the Restraining Order (RO) or Emergency Protection Order (EPO).

Anything outside of the approved listed documents would need to be discussed with the principal at the school where you are registering.

## Proof of Address

The proof of address must have the parent / legal guardian / independent student name and current address. Examples of accepted proof of address documents are:

- Bank statement
- GST rebate
- Home or renter insurance
- Income tax statement
- Mortgage statement
- Property tax assessment
- Utility bill

Anything outside of the approved listed documents would need to be discussed with the principal at the school where you are registering.

## Relationship

The following are the options for relationships:

- Agency Representative
- Babysitter
- Cousin
- Custodian
- DLSA - CBE Diversity & Learning Support Advisor
- Family Friend
- Father
- Foster Parent
- Grandparent
- Group Home Case Worker
- Home Stay Parent
- Interpreter
- Legal Guardian
- Mother
- Other
- Outside School Care
- Parent
- Partner
- Physician
- Probation Officer
- Psychologist
- Relative
- Sibling
- Social Worker
- Sponsor
- Spouse
- Stepfather
- Stepmother
- Stepparent
- Stepsibling
- System AP, Global Learning
- Unspecified

## Custody and Guardianship Documents

The original court document must be provided to the school. The school will make a copy of the document, which will be placed in the Official Student Record (OSR).

- **Decision Making** – legal authority for making day-to-day decisions affecting the child. Similar to joint custody, can be court ordered. If not addressed in an Order, the guardians usually both have rights and responsibilities for this.
- **Delegation of Powers and Duties to a Child Caregiver** – implicit sub-allocation of powers and duties by the Director of Child and Family Services, or their delegate (i.e., the social worker), under the *Child, Youth and Family Enhancement Act*. Done by the social worker for a child in protective custody – either Temporary Guardianship Order (TGO) or Permanent Guardianship Order (PGO).
- **Joint / Shared Custody / Parenting** – more than one guardian may exercise the powers, responsibilities and entitlements of guardianship, unless the court orders otherwise; shall use best efforts to co-operate with one another in exercising their powers, responsibilities and entitlements of guardianship. Can be court ordered, or presumed if the parents were married and are now separated but have not been to court.
- **Sole Custody / Parenting** – allocation, generally or specifically, of the powers, responsibilities and entitlements of guardianship exclusive to one individual. Usually court ordered.

## Release of Information Form

Releasing educational information to people outside of the education system such as doctors, lawyers, nurses, private psychologists, hospitals or other individuals as identified by the parent / legal guardian, **is not a requirement of registration or enrollment**. It is only done when this information is needed to provide an effective educational program for the child and/or to assist parents / legal guardians. Student personal information can only be released with the parent's / legal guardian's informed consent (agreement). If a parent / legal guardian has a need to release their child's educational information (e.g., student record, assessments, programs), certificated school personnel must explain the form and what giving consent entails *before* the legal guardian / parent can be given the form to complete.

Please contact the school if you wish to complete the form to give permission to The Calgary Board of Education to release your child's educational information to people outside of the education system. A time will be arranged for you to meet virtually with a certificated school staff member.