



Prairie South School Division No. 210

15 Thatcher Drive East Phone: (306) 694-1200 Fax: (306) 694-4955
Moose Jaw, SK S6J 1L8 Outside the Moose Jaw Area: 1-877-434-1200

www.prairiesouth.ca

STUDENT REGISTRATION FORM

School: _____

Student Personal Information:

Legal Student Name: _____ Grade: _____
Last First Middle

Name used (if other than legal name): _____

Gender: ___ M ___ F Birth date: _____ / _____ / _____ Home Phone #: _____
Month / Day / Year

Address: **BOTH** Street and PO Box: _____
Apt. # House # Street Box #

Town/City: _____ Province: _____ Postal Code: _____

Legal Land Description (**Rural only**): _____
(Include the RM name & number)

Citizenship: _____ Province of Birth: _____ Country of Birth: _____

Sk Health Number: _____ Language spoken in the home: _____

Student Resides with: mother & father: _____ mother only: _____ father only: _____ mother/stepfather: _____
father/stepmother: _____ guardian: _____ self only: _____ *roommate/other: _____

***If not living with parents, please complete the following:**

Name of person you live with: _____ Relationship to you: _____

Employer: _____ Business Phone #: _____

Date of entry to any schooling (K or Grade 1): _____

Previous School (if applicable): _____

Previous School Address: _____

Previous School Phone: _____

Parent Information:

Mother's Name: _____

Employer: _____

Work Phone #: _____

Cell Phone #: _____

Home Phone #: _____

Address: _____

Email Address: _____

Father's Name: _____

Employer: _____

Work Phone #: _____

Cell Phone #: _____

Home Phone #: _____

Address: _____

Email Address: _____

Emergency Contact

Name: _____

Emergency Contact Phone #: _____ Relationship to you: _____

(Emergency contact should be someone who is in close proximity to the school who can be contacted if the parents are unavailable)

Bus Information

Bus Driver Name: _____ Bus Route #: _____

Bus Driver Phone #: _____

Billet Information (for bused students only):

Billet Name: _____ Billet Phone #: _____

Billet Address: _____

Aboriginal Ancestry (self-declaration) (Voluntary)

Aboriginal people are those who identify themselves to be Registered/Treaty/Status Indian, Non-Status Indian, Métis, or Inuit. Based on this definition do you consider your child to be an Aboriginal person? Yes _____ No _____

If yes, please specify the Aboriginal group your child belongs to:

_____ Registered/Treaty/Status Indian _____ Métis _____ Non-Status Indian _____ Inuit

Daycare/Babysitter Name: _____

Address: _____ Phone #: _____

Doctor's Name: _____ Phone #: _____

Medical Information (allergies, asthma, etc.) _____

Parent's Signature

Date

OFFICE USE ONLY

(This section is for school use only)

Sk Education Student ID No: _____ Special Ed Code: _____

Program: EAL: _____ French Immersion: _____ On-Line: _____ Other: _____

Home Room #: _____ Locker #: _____ Lock Combination #: _____

Copy on file: Birth Certificate: _____ Health Card: _____

Foreign Student

Non-Canadian

Country of Origin: _____

Exchange Student: Yes: _____ No: _____ Type of Exchange Program: _____

Tuition Required: Yes: _____ No: _____

Non-Saskatchewan

Province of Origin: _____

Exchange Student: Yes: _____ No: _____ Type of Exchange Program: _____

Tuition Required: Yes: _____ No: _____