



“Where Tradition Meets The Future”

Winston Knoll Collegiate

5255 Rochdale Blvd, Regina, SK S4X 4M8
Phone: (306) 523-3400 Fax: (306) 751-4831
Web Site: winstonknollcollegiate.rbe.sk.ca

2018 - 2019 Registration Form

Mission Statement

Winston Knoll Collegiate is dedicated to working with its community to maximize learning for all students and develop informed, responsible citizens.

Student Information

Please Print

Parent/Guardian Information

Student Last Name: _____

Student First Name: _____

Student Middle Name: _____

Address : _____

City: _____ Postal Code: _____

Home Phone: _____

Student Cell: _____

Gender: Male Female Unspecified

Date of Birth: _____ / _____ / _____
Month Day Year

Names of Sibling(s) at Knoll _____

Learning Resource Assistance

Have you had LR, Tutorial, or an Educational Assistant in the past:

Yes

No

If Yes what grades and how long: _____

Have you had EAL support: Yes No

Medical Information: _____

Previous School Attended:

If living on an acreage or farm, please provide land location:

Sec _____ Township _____ Range _____ Meridian _____

Contact 1: Relationship to Student _____

Full Name: _____

Work Phone: _____ Cell: _____

Home Phone: _____

Address: Same or _____

Email Address: _____

Contact 2: Relationship to Student _____

Full Name: _____

Work Phone: _____ Cell: _____

Home Phone: _____

Address: Same or _____

Email Address: _____

Contact 3: Emergency Information (if different from above)

Full Name: _____

Relationship to student: _____

Home Phone: _____ Cell: _____

Work Phone: _____

Declaration & Transfer Of Student Records

As the legal parent/guardian of the student named above, I hereby declare that the information provided is correct to the best of my knowledge, and authorize and request the transfer of the student's school records to Winston Knoll Collegiate.

Parent/Guardian Signature

Student Signature

Date

Grade 9

Required Areas of Study

- | | |
|---|--|
| <input checked="" type="checkbox"/> 0000 TAG

<input type="checkbox"/> 0917 ELA 9A &
<input type="checkbox"/> 0918 ELA 9B

OR
<input type="checkbox"/> 0917 Pre-AP ELA 9A* &
<input type="checkbox"/> 0918 Pre-AP ELA 9B*

<input checked="" type="checkbox"/> 0907 Social Studies 9

<input type="checkbox"/> 0903 Mathematics 9

OR
<input type="checkbox"/> 0903 Pre-AP Mathematics 9* | <input type="checkbox"/> 0914 Science 9

OR
<input type="checkbox"/> 0914 Pre-AP Science 9*

<input checked="" type="checkbox"/> 0930 Arts Education 9
(Art, Drama, Music, Dance)

<input checked="" type="checkbox"/> 0947 Practical & Applied Arts 9A
(Computer Literacy, Industrial Arts,
Foods, Communication Media,
Digital Citizenship)

<input checked="" type="checkbox"/> 0900 Wellness 9 |
|---|--|

* Pre AP (Advanced Placement) is open to all students and offers an advanced academic program

Elective Areas of Study

Choose **ONE** of the following:

- 0919 French 9
 0981 Health and Career Education 9

Students may choose **both** if they wish.
School will accommodate class times.

- 0926 Band 9 Noon Hour Class (Year Long)
 0942 Instrumental Jazz 9 (Year Long @ 7:30)
 0929 Choral 9 Noon Hour Class (Year Long)

Medical Information

Saskatchewan Health Number: _____

This number is collected and used at the school level to address Emergent Medical situations. The Department of Learning uses the HSN to ensure students' educational needs are being met. Saskatchewan Learning will not use the Health Services Number for any other purpose.

Medical Alert Information: _____

Course Fees:

Band	15.00
Choral	15.00
PAA 9	20.00
Wellness 9	20.00

Declaration

The following information is collected for Saskatchewan Learning and disclosure is protected under the Local Freedom of Information and Protection of Privacy Act.

Country of Birth _____	Country of Origin _____
First Country of Citizenship _____	Second Country of Citizenship _____
First Language spoken at home _____	Second Language spoken at home _____

Information on Aboriginal ancestry is collected in the SDS by Saskatchewan Learning to inform program decisions at the local and provincial levels. Schools are required to provide students with the opportunity to self declare their Aboriginal ancestry. 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 yourself to be an Aboriginal person? Yes No

If *Yes*, please specify the Aboriginal group you belong to:

- First Nation/Registered/Treaty/Status
 First Nation/Non-registered/Non-status
 Métis
 Inuit

Band Affiliation (Optional) _____ Treaty Status Number _____