WETASKIWIN REGIONAL PUBLIC SCHOOLS

***“****Inspiring students to become the best they can be.”*



FORM 178-1

**STUDENT INFORMATION CHANGE**

This form is used to confirm changes to a student’s registration demographic information. This form must be signed by a Parent or Legal Guardian.

STUDENT NAME & DATE OF BIRTH ***Legal Name and Date of Birth Must be Completed***

**Student Legal Name** (First, Last):

Date of Birth: Month Day Year Gender:  Male  Female  Unspecified  
  
**Preferred Name** (*if different from Legal Name*):   
(the name in the Student Information System, the name to be used for all school records, reports, and formal written communications).  
  
STUDENT ADDRESS ***(please complete only if there is a change to the student’s current information)***

**Mailing Address**:

House Number: Street: Box:

City: Postal Code:   
Home Phone:   
  
**Physical Address:** *(if different than mailing)*  
House Number: Street: City: Postal Code:   
Blue Sign:

Legal Land Description:

Pt Section: NE NW SE SW, Section: Township: Range: Meridian:

CONTACT PERSON – Priority **#1**

***(please complete IF there is a change to the student’s current information, leave blank if no change)***  
  
Name (First, Last): Relation:

Phone #1:  Home  Mobile  Work

Phone #2:  Home  Mobile  Work

Email: **** **check if** **emergency contact person only**

CONTACT PERSON – Priority **#2**

***(please complete IF there is a change to the student’s current information, leave blank if no change)***

Name (First, Last): Relation:

Phone #1:  Home  Mobile  Work

Phone #2:  Home  Mobile  Work

Email: **** **check if** **emergency contact person only**

MEDICAL INFORMATION

***(please complete ONLY IF there is a change to the student’s current medical information on record.***

***Leave blank if no change.***

GUARDIANSHIP/CUSTODY/ACCESS RIGHTS

***(please complete IF there is a change to the student’s current information, leave blank if no change)***

**Legal guardians** of the student must be identified to ensure each party’s rights are respected. If a Court Order exists **changing** guardianship, custody or access rights, a copy of the Order is required to be placed on the Student Record. In rare instances a child may be designated as ‘protected’ if a court issues a restraining order under the *Child Welfare Act*, the *Divorce Act*, the *Young Offenders Act* or similar legislation.

✔️ Check this box to indicate YES, there is a change in guardianship, custody or access rights for the student named on this form.  **A copy of the Order is required to be placed on the Student Record. Please provide a copy of such Order along with this form.**

PARENT/LEGAL GUARDIAN CONSENT:

By signing this form, I confirm and give consent to Wetaskiwin Regional Public Schools to make the indicated changes to my student’s registration demographic information in the Student Information System.

Parent/Legal Guardian Full Name (print) :

Parent/Legal Guardian Signature:

Date:  
   
Month Day Year

\*A copy of this form will be filed to the student record

The personal information collected on this form is necessary for the School Division to operate educational programming and will be entered into automated systems which support the efficiency of student services. This collection is authorized by Education Act and sections 4(a) and (c) of the Protection of Privacy Act. For questions about the collection of personal information, contact the Privacy Officer at www.wrps11.ca or 780-352-6018.