



Chief Moosomin School

Box 82 Cochin SK, S0M 0L0

Phone: (306)386-2110 Fax: (306)386-3112

“Together we will work to offer Holistic Education for our Children”

New Student Registration Form

Today's Date:

A. Student Information		
Last Name	First Name	Middle Name
Gender	Date of Birth (mm/dd/yyyy)	Saskatchewan Health Number
Registering for what Grade: ☐ PreK ☐ K ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 ☐ 11 ☐ 12		
B. Medical Notes/Allergies		
C. Self-Declaration		
☐ First Nation (status) ☐ First Nation (non-status) ☐ Metis ☐ Non-First If you checked Status First Nation, Please provide the following: Nation		
Name of band the student is registered to:	Status/Treaty Number:	
D. Student Residence (On-Reserve students only)		
Does your child reside on Moosomin First Nation? ☐ YES ☐ NO If you checked YES, please provide the following:		
Land Location:	Band House Number:	

Mailing Address:		
E. Student Address (Off-Reserve students only)		
Street/House Number	City/Town, Province	Postal Code
Mailing Address:		
F. Parent/Guardian Information		
☐ Mother ☐ Father ☐ Guardian		
Last Name:	First Name:	Middle Name (Optional)
Home Phone:	Cell Phone:	Email:
☐ Mother ☐ Father ☐ Guardian		
Last Name:	First Name:	Middle Name (Optional)
Home Phone:	Cell Phone:	Email:
G. Emergency Contact		
Last Name:	First Name:	Middle Name (Optional)
Home Phone:	Cell Phone:	Email:

H. Enrollment Information

☐ New Student (no previous schooling) ☐ Transfer from another school ☐ Current Student

If transferring from another school, please provide the following information:

School Name:	Town/City	Phone Number/Email (if known)

I. Transportation

Bus Driver:

Please list all children living in the same household that requires bus transportation.

Full Name (First and Last)	Date of Birth (DD/MM/YYYY)	Grade
1.		
2.		
3.		
4.		
5.		
6.		

Employees of Moosomin First Nation Education Council may use the information collected on this form to help provide appropriate educational programming and support for the student.

Demographic information is shared with Saskatchewan Ministry of Education to support the Student Information System (SIS). How the information is accessed, used, or disclosed is protected under the Freedom of Information and Protection of Privacy Act and the Local Authority of Information and Protection of Privacy Act.

Note: Your child is not officially registered until legal documentation is brought to the school and verified by the school personnel.

J. Declaration

I, the undersigned, hereby represent that I have the legal authority to register the child. I declare the information that I have provided on this form is complete and accurate. I will notify the school of any changes to the information on this form.

Date:

Signature of Parent/Custodial Parent/Legal Guardian

