

**Grade 8 to Grade 9
Non-HWCDSB Student
INTAKE PACKAGE**



**St. Thomas More Catholic Secondary School
INTAKE APPLICATION
Information to be completed when making appointment for interview**

Date of Application		For September <input type="checkbox"/>	For February <input type="checkbox"/>
Name		Previous School(s)	
Address		Alternate Phone	
Parent /Guardian Name 1. Parent/Guardian Name 2 .		Does Student Reside with Parent(s)/Guardian	Custody Documentation if applicable
Home Phone	Age	DOB (Y/M/D)	Current Grade Proposed Grade
ACTION REQUIRED: L. Gambale <input type="checkbox"/> K. Monaco <input type="checkbox"/> M. Marrazzo <input type="checkbox"/>		Date of Appointment	
Within Boundaries? (West of U. Wentworth North of Rymal)	If not which Catholic School?	Reason for Transfer	
Birthplace		Time	
SpecEd / IEP _____ ELL _____ Visa _____ Student Success _____ Crown Ward _____			

INTERVIEW CONSIDERATIONS (OFFICE USE ONLY)

1. International Student (Letter of Acceptance)	
2. Catholicity / Religion Courses	
3. Dress Code / Behaviour	
4. Academics (transcripts, reports, Attendance, Christian service hours)	
5. Athletics (eligibility package given)	
6. Suspension / Expulsion (declaration of status / performance)	
7. OSSLT	
Permission Granted: Yes <input type="checkbox"/> No <input type="checkbox"/>	Conditions:
Registration Fees Waived: Yes <input type="checkbox"/> No <input type="checkbox"/>	Uniform Letter: Yes <input type="checkbox"/> No <input type="checkbox"/> Admin. Initials:

REGISTRATION

GUIDANCE	Course / schedule/ Registration form/ fees
MAIN OFFICE	Other student information.
ATTENDANCE OFFICE	Locker
COMMENT	



Hamilton-Wentworth Catholic District School Board (HWCDSD) St. Thomas More C.S.S. Student Registration Form 2021-2022

Has your child ever attended an HWCDSD school? Yes No

STUDENT INFORMATION

Legal Name: _____
Surname First Name Middle Name

Preferred Name: _____
First Name

Birth Date: _____ Province of Birth: _____ Gender: _____
YYYY MMM DD M/F

Siblings: _____
(Surname, First Name)

First Language: _____ Language Spoken at Home: _____

Home Phone: _____

Home Address: _____ Mailing Address: _____
(leave blank if same as home address)

City: _____

Postal Code: _____

SCHOOL HISTORY

Previous School Attended: _____ OEN: _____

City, Province: _____ School Board: _____

School Phone Number: _____ Last Date of Attendance: _____

Student has been identified through the IPRC process as Exceptional Pupil Current Grade: _____

Student has an IEP Student has a Safety Plan

INDIGENOUS ANCESTRY - (Voluntary and Confidential Self Identification)

First Nations The information on the individual students is kept confidential in accordance with the Municipal Freedom of Information and Protection Privacy Act. The Hamilton-Wentworth Catholic District School Board shares its Aboriginal Self-Identification data with the Ministry through OnSIS and with the Education Quality Accountability Office (EQAO). The Ministry will be using this data to develop policies and programmes that better support student achievement across the province, and will be reporting its findings in an aggregate or collective format to the public.

Inuit

Métis

CITIZENSHIP - If country of birth is other than Canada, please complete this section.

Country of Birth: _____ Country of Citizenship: _____

Status in Canada: _____ Expiry Date: _____ Arrival Date: _____

MEDICAL INFORMATION

Medical Peril: (Medical peril refers to medical conditions, diagnosed by a physician, which are or have the potential to be life threatening)

Medical Conditions *(Serious medical alerts, chronic illnesses, allergies, and treatment or medication needed should be noted.)*

OFFICE USE ONLY

Student Number: _____ Document used for Proof of Residency: _____ Age Verification:

OEN: _____ Program: _____ Homeroom: _____ Grade: _____ Catholic Verification:



Hamilton-Wentworth Catholic District School Board (HWCDSB) St. Thomas More C.S.S. Student Registration 2021-2022

SACRAMENTS

Roman Catholic:	<input type="checkbox"/>	Baptism	_____	_____
Current Parish:	_____	Reconciliation	_____	_____
		First Communion	_____	_____
		Confirmation	_____	_____
			YYYY MMM DD	Parish

PRIMARY CONTACTS

Priority:	<u>1</u>	Priority:	<u>2</u>
Full Name:	_____	Full Name:	_____
Relationship:	_____	Relationship:	_____
Street Address:	_____	Street Address:	_____
City:	_____	City:	_____
Postal Code:	_____	Postal Code:	_____
Home Phone:	_____	Home Phone:	_____
Mobile Phone:	_____	Mobile Phone:	_____
E-Mail:	_____	E-Mail:	_____
Employer:	_____	Employer:	_____
Bus Phone:	_____	Bus Phone:	_____
	Ext: _____		Ext: _____
Catholic (Y/N)	_____	English Speaking (Y/N)	_____
Guardian (Y/N)	_____	Lives with Student (Y/N)	_____
Access to Records (Y/N)	_____	Access to Student (Y/N)	_____
Custody (Y/N)	_____	Receives Mail (Y/N)	_____

EMERGENCY CONTACT

Priority:	<u>3</u>	Guardian (Y/N)	_____	English Speaking (Y/N)	_____
Full Name:	_____	Access to Records (Y/N)	_____	Lives with Student (Y/N)	_____
Relationship:	_____	Custody (Y/N)	_____	Access to Student (Y/N)	_____
Home Phone:	_____			Receives Mail (Y/N)	_____
Business Phone:	_____				
Mobile Phone:	_____				

Custody refers to the person(s) who have the legal right to make decisions for the child

Guardian refers to control over and responsibility for the care, upbringing, and education of the child

Access to Records refers to the right to make inquiries about and to be given information about the health, education, and welfare of the child

Access to Student refers to the right to visit with and be visited by the child, including picking up the child from school

Receives Mail Identifies the person(s) who can be mailed information concerning the student



Hamilton-Wentworth Catholic District School Board (HWCDsb) St. Thomas More C.S.S. Student Registration 2021-2022

COLLECTION AND USE OF STUDENT INFORMATION

The Hamilton-Wentworth Catholic District School Board (HWCDsb) collects and uses personal information under the legal authority of The Education Act and Regulations, The Ontario Student Record (O.S.R.) Guideline, 2000, and the Municipal Freedom of Information and Protection of Privacy Act to support student achievement and well-being.

The use of student images/voice/video/work is permitted, without consent, for educational programming and assessment purposes, or for other purposes consistent with its use and where there is a reasonable expectation that students may be identified (e.g. student displays of work or images displayed in the school hallways, recognition assemblies, participation in school sports events, student showcases of artwork or writing, graduation awards and programs, etc.).

Under Ontario law, the HWCDsb is required to inform you and obtain your consent about how your child's personal information is used and disclosed when not for the purpose of educational programming and assessment.

REGISTRATION REQUIREMENTS

For students new to the system, to register for admission to this school, please provide the following:

- ▶ Birth Certificate
- ▶ Immigration Information (if applicable)
 - VISA, Refugee Status
 - Permanent Resident Status
- ▶ IEP Accommodations/Modifications (if applicable)
- ▶ Attendance Profile from previous school(s)
- ▶ Transcripts from Last School (if applicable)
- ▶ Last Report Card
- ▶ Proof of residency e.g. driver's licence, utility bill
- ▶ Year Book/Agenda Book fees (if applicable)
- ▶ Court Order re: Custody provisions (if applicable)

INTERNET ACCESS AND PERSONAL ELECTRONIC DEVICES

The HWCDsb supports access by students to a wide range of information resources and the development by staff of appropriate skills to evaluate and integrate such resources in the school's curriculum. The HWCDsb therefore will:

- ▶ Provide a personal login ID that facilitates Network and Internet access;
- ▶ Monitor accounts, when necessary, on the HWCDsb's network to ensure the Safety of self and others; and
- ▶ Enforce the Internet-Acceptable Use Policy (S.15) and Personal Electronic Devices Policy (A.12)

Students are responsible for appropriate behaviour on school networks just as they are in a classroom or a school hallway. The network is provided for cultural enrichment, to conduct research, and to communicate with others. In order to ensure proper use of the network, students are required to:

- ▶ Use the Network and Internet in schools according to the regulations outlined in the Internet-Acceptable Use Policy (S.15) and Personal Electronic Devices Policy (A.12)
<http://www.hwcdsb.ca/board/policies>

Students are required to complete a Student Agreement Form - for use of the HWCDsbNET and access to the Internet before being given Internet access through the school network(s). Such access is a privilege and will be granted only to students who agree to follow the guidelines established by the HWCDsb.

CATHOLICITY OF SCHOOL

In having decided to register at this school, you have selected a school with an excellent academic reputation, a full co-instructional program, excellent facilities and most importantly, a deep commitment to the school's role as a Roman Catholic institution.

This school by its very nature is Christ-centred. All programs are taught in the context of gospel values and the teaching of the Roman Catholic Church. Catholicity permeates the entire curriculum and is not confined only to Religious Education classes. All students enrol in a Religion course each year, which is a full credit course, but the transmission of the school's Roman Catholic culture is integrated into everything the school does.

When you enrol at this school you accept the entire program including the school uniform, the school's Code of Student behaviour, Safe Schools policy, co-instructional constitution and, most importantly, the Roman Catholic nature of the school.



Hamilton-Wentworth Catholic District School Board (HWCD SB) St. Thomas More C.S.S. Student Registration 2021-2022

Office Use Only:		
<input type="checkbox"/> Cash	<input type="checkbox"/> Online	
<input type="checkbox"/> Cheque	_____	_____
	Amount	Date
		Received By

CASL (ANTI-SPAM) CONSENT

Canada's Anti-Spam Legislation (CASL) came into effect on July 1, 2014. Under the legislation, anyone who sends an electronic message that encourages participation in a commercial activity must obtain the consent of the recipient. The HWCD SB would like to be able to use your contact information to provide you with information about fundraising events, yearbook sales, student photos, Uniforms, and other school activities that may be considered commercial in nature.

Contact 1 E-mail	<input type="checkbox"/> Yes - I Consent	<input type="checkbox"/> No - I Do Not Consent
Contact 2 E-mail	<input type="checkbox"/> Yes - I Consent	<input type="checkbox"/> No - I Do Not Consent

This consent may be withdrawn at any time with written notice to the principal or amended through the annual student information verification form. If you have any questions or concerns, please contact your school principal.

CONSENT TO POST STUDENT MEDIA CONTENT

The HWCD SB regularly celebrates student achievement and showcases school activities to the Roman Catholic and wider community throughout the school year through a variety of communication channels including, but not limited to HWCD SB and school websites, third-party websites, social media, publications, news media (print/radio/television/web), and promotional and educational materials. Parent/guardian consent is required to take and use your child's name, image, voice, video and work for the above stated purposes.

I hereby given my consent to the HWCD SB, its employees and affiliates (Roman Catholic Diocese of Hamilton, Ontario Catholic School Trustees' Association) to use, display, publish and/or broadcast my child's name/image/voice/video/work for educational, promotional and media purposes through the various communication platforms outlined above. This consent is given voluntarily in accordance with the Municipal Freedom of Information and Protection and Privacy Act.

I agree that participation in any publication, promotional media, website and/or social media produced by the HWCD SB, its employees, the Roman Catholic Diocese of Hamilton, and OCSTA confers upon me no rights of ownership whatsoever. I release the HWCD SB, its employees and affiliates from liability for any claims to compensation or damages by me or any third party in connection with the use of your child's name, image, audio/video recording, and work.

Yes - I Consent No - I Do Not Consent

This consent is given voluntarily and valid for one year. The consent can be withdrawn at any time with written notice to the Principal, or can be amended on the annual student information verification form. Please contact your school Principal with any questions or concerns.

MEDIA RELEASE CONSENT

The HWCD SB and its schools cooperate with media organizations, within reason, to encourage the celebration of Catholic education, school initiatives and achievements, through the sharing of information about students, staff and their work, and the reporting of newsworthy events. This may require that a media organization interview, photograph and/or film/record your child. This will only be permitted with your consent.

Yes - I Consent No - I Do Not Consent

This consent is given voluntarily and valid for one year. The consent can be withdrawn at any time with written notice to the Principal, or can be amended on the annual student information verification form. Please contact your school Principal with any questions or concerns.

I hereby certify that I have read through all (4) pages of this document, and have verified the accuracy of all information contained therein; additionally, I hereby accept the Secondary School Registration Requirements (page 3) of the Hamilton-Wentworth Catholic District School Board and the school to which this form applies.

Student Name (Please Print)	Student Signature	Date
Parent/Guardian Name (Please Print)	Parent/Guardian Signature	Date
Parent/Guardian Name (Please Print)	Parent/Guardian Signature	Date

Under the Municipal Freedom of Information and Protection of Privacy Act, 1989, information in forms and documents pertaining to a student registered/enrolled within the Hamilton-Wentworth Catholic District School Board is collected under the legal authority of the Education Act, and its Regulations, and the Ontario Student Record (O.S.R.) Guideline, 2000. This information is being collected for the purpose of recording the registration of the student so identified in this form for educational programs provided by the school. Contact person about the collection of this information is the Principal of the school.



RECEIPT St. Thomas More C.S.S. ACTIVITY FEE (YEARBOOK, AGENDA, ETC) 2021-2022

Date: _____	Student: _____
Amount: _____ \$45	Per: _____
Received from: _____	<input type="checkbox"/> Cash <input type="checkbox"/> Online
	<input type="checkbox"/> Cheque _____

St. Thomas More Catholic Secondary School

1045 Upper Paradise Road, Hamilton, Ontario L9B 2N4

Telephone 905-388-3030 Fax 905-388-3056

Mr. D. DiFrancesco, Principal

Mr. K. Monaco, Vice-Principal, Mrs. L. Gambale, Vice-Principal, Mr. M. Marrasso, Vice-Principal

TRANSITION INFORMATION SHEET

Name: _____ Current/ Most Recent:School: _____

QUESTION	NO	YES	
Within the past two years, have you been subjected to a suspension from school?			If yes, when and why?
Are you currently under suspension?			If yes, are you being considered for expulsion?
Have you ever withdrawn as a student from a school board?			If yes, when and why?
Are you currently an expelled student?			If yes, when and why?
Have you ever been expelled by a school board or principal of a school?			If yes, when and why?
Have you ever applied for re-entry to a school board/or board?			

As Parent / Guardian of the above-named student, I hereby authorize the release of information related to said student by the administration of his/her current / most recent school.

I acknowledge the above information to be true to the best of my knowledge and belief, and that the information provided is being relied upon by the Principal/Board.

Parent / Guardian Signature: _____

Signature of the Student _____

Date: _____

St. Thomas More Catholic Secondary School

1045 Upper Paradise Road, Hamilton, Ontario L9B 2N4

Telephone 905-388-3030 Fax 905-388-3056

Mr. D. DiFrancesco, Principal

Mr. K. Monaco, Vice-Principal, Mrs. L. Gambale, Vice-Principal, Mr. M. Marrazzo, Vice-Principal

CATHOLICITY OF SCHOOL

Name of Student: _____ Current/Most Recent School: _____

Upon completion of the registration package, you may be granted admission to St. Thomas More Catholic Secondary School subject to your understanding and acceptance of the Catholic character of the school, availability of space and other information provided below.

In having decided to register at St. Thomas More Catholic S.S., you have selected a school with an excellent academic reputation, a full co-instructional program, excellent facilities and most importantly, a deep commitment to the school's role as a Catholic institution.

St. Thomas More Catholic Secondary School by its very nature is Christ-centred. All programs are taught in the context of Gospel values and the teaching of the Catholic Church. Catholicity permeates the entire curriculum and is not confined only to Religious Education classes. All students enrol in a Religion course each year, which is a full-credit course, but the transmission of the school's Catholic culture is integrated into everything the school does.

When you enrol at St. Thomas More Catholic Secondary School, you accept the entire program including the school uniform, the school's *Code of Student Behaviour*, *Safe Schools* policy, co-instructional constitution and, most importantly, the Catholic nature of the school.

Parent Signature

Student Signature

APPLICATION FOR INTERNET ACCESS

The Board supports access by students to a wide range of information resources and the development by staff of appropriate skills to evaluate and integrate such resources in the school's curriculum.

The Board therefore will:

- provide Internet access under the supervision of teachers in schools
- provide user IDs to students
- monitor accounts, when necessary, on the Board's network.

Students are responsible for appropriate behaviour on school networks just as they are in a classroom or a school hallway. The network is provided for cultural enrichment, to conduct research and to communicate with others.

In order to ensure proper use of the network, students are required to:

- use the internet in schools under teacher supervision
- obtain permission from the teacher before using the network (when doing independent study).

Students are required to complete a *Student Agreement Form – for use of the HSCDSBNET and Access to the Internet* before being given internet access through the school network(s). Such access is a privilege and will be granted only to students who agree to follow the guidelines established by the Hamilton-Wentworth Catholic District School Board.

NOTE:

1. Students having attended elementary school within the Hamilton-Wentworth Catholic District School Board have already completed the Student Agreement Form and therefore are exempt from this requirement.
2. All other registrants must complete the *Student Agreement Form* and the *Application for Internet Access* forms which are available through the school office.

Secondary School Intake Requirement Agreement of Understanding

I/We have read the foregoing registration information and hereby accept the Secondary School Registration Requirements of the Hamilton-Wentworth Catholic District School Board and the school to which application is being made.

 Student Signature

 Parent Signature

Date: _____

St. Thomas More Catholic Secondary School

1045 Upper Paradise Road, Hamilton, Ontario L9B 2N4

Telephone 905-388-3030 Fax 905-388-3056

Mr. D. DiFrancesco, Principal

Mr. K. Monaco, Vice-Principal, Mrs. L. Gambale, Vice-Principal, Mr. M. Marrazzo, Vice-Principal

DECLARATION OF PERFORMANCE

Student's Name: _____ Date: _____

My registration/continued attendance at St. Thomas More Catholic Secondary School is dependent on my compliance with the conditions stated below. I understand that if a review determines that I am failing to comply, then I will withdraw or be excluded from the school.

- I will be in full attendance, on a punctual basis, at all of my classes, except when ill or for reasons approved by the school administration or stated in its *Code of Student Behaviour*. Any impending absence will be reported to the school by 8:00 a.m. I will be allowed a maximum of _____ **justifiable** absences during a semester.
- I will give assiduous attention to my school work by:
 - having proper books and materials with me for each class
 - completing homework and assignments on a timely basis
 - preparing adequately for tests, exams and other evaluations
 - being attentive, cooperative and hard-working in class.
- I will follow published school rules in class, on school property, on buses and at school events.
- I will be respectful of fellow students, their rights and their property.
- I will be respectful to all staff including teachers, administrators, support staff, volunteers and adult guests in our school.

Signatures:

Student: _____

Parent / Guardian: _____

Principal / Vice-Principal: _____

Superintendent (if required): _____

Page 4 of 4 (applicant)

Pupil Eligibility and Attestation Form

Student Name: _____

AS-19-2

CITIZENSHIP/IMMIGRATION INFORMATION

Parent must present proof of child's entry into Canada. Date of entry is the date that the student enters Canada to live, not a short term visit/vacation in Canada taken beforehand. Check off the document presented, and the date on the document (should match the date of entry). **Only one section is required to be completed.**

Date Format: DD-MM-YYYY

Canadian Citizenship (Child born in Canada):

City of Birth: _____

Province: _____

Fee Paying Students

Student Study Permit for Visa Student:

Study Permit valid from: _____ to _____

Student Visa
Total Tuition Fee Paid: \$ _____

Fee Payment Date: _____

Visitor Record:

Visitor Record valid from: _____ to _____

Visitor Visa
Total Tuition Fee Paid: \$ _____

Fee Payment Date: _____

Exchange Student: Attending Host school

Exchange Agreement

Agency: _____

Duration of Exchange: _____ to _____

Name of Reciprocal Student: _____ Country of Reciprocal Student: _____

Permanent Resident (check one):

Parent/Guardian Student (if an adult) Date became a permanent resident: _____ Stage One

Approval Letter Stage 1 Approval Letter Date: _____

Equivalent Documentation from Immigration, Refugees and Citizenship Canada (IRCC) confirming approval in principle (specify below type of document with date)

Type of Document Reviewed: _____

Date: _____

Refugee Status:
<input type="checkbox"/> Documentation from IRCC confirming Refugee Status Date of Entry (stamped date on document): _____ <input type="checkbox"/> Consideration of Eligibility (Convention Refugee) Date of Entry (stamped date on document): _____
Parent's Study Permit:
<input type="checkbox"/> Parent's Acceptance Letter confirming the parent will be a full-time student at a qualified university, college or institution in Ontario (retain copy in child's OSR) <input type="checkbox"/> Parent Study Permit Parent's Study Permit valid from: _____ to _____ Verify that the parent is a full-time student enrolled in a degree, diploma, or certificate program that consists of a minimum of 2-3 semesters and 600+ hours of instruction (check one) <input type="checkbox"/> Degree <input type="checkbox"/> Diploma <input type="checkbox"/> Certificate
Parent's Work Permit:
<input type="checkbox"/> Documentation from IRCC confirming approval of Work Permit (i.e. actual work permit to be issued at a later date) <input type="checkbox"/> Parent Work Permit Work Permit valid from: _____ to _____ Student's Study Permit ***: <input type="checkbox"/> <input type="checkbox"/> Student Study Permit (Parent's work permit to be issued at a later date) Study Permit valid from: _____ to _____ ***This student study permit is given to a child accompanying their parent on a work permit to Ontario
Other:
<input type="checkbox"/> <input type="checkbox"/> Diplomat Status/Minister's Permit Valid from: _____ to _____
Confirmation of Documentation and Student Eligibility for ESL/PANA Funding
Country of Birth: _____ Citizen of: _____ Original Date of First Entry into Canada: _____ <input type="checkbox"/> Verified Canadian Stamped Date of Entry on passport

Principal/Designate

Name (Please Print): _____

Principal Signature: _____

School Name: _____

Date: _____

DISCLAIMER: School boards must use a Pupil Eligibility Attestation form to document the board's review and verification of relevant documentation to confirm pupil eligibility in the areas listed above. Furthermore, a physical copy of a student's personal (i.e. Birth certificates and passports) or immigration documentation will NOT be retained at the time of registration as stated in the "Clarification of Policies and Supporting Documentation to Confirm Pupil Residency and Eligibility Status", Memorandum No. 2018:SB08, April 25, 2018.