



The Red River Valley School Division
Division Scolaire Vallée de la Rivière Rouge
P.O. Box 400 Morris, MB R0G 1Y0
PH: 2040746-2317 FX: 204-746-2785 EMAIL: rrvsd@rrvsd.ca
www.rrvsd.ca

This personal information and personal health information, is being collected under the authority of The Red River Valley School Division and will be used for educational purposes or to ensure the health and safety of the student. It is protected under the provisions of the Freedom of Information and Protection of Privacy Act and The Personal Health Information Act. If you have any questions about the collection of this information, please contact The Red River Valley School Division.

<hr/> School	<hr/> School Year	<hr/> Previous School Attended
<hr/> Legal Surname	<hr/> Legal Land Description (Section/Township/Range/Street Address)	
<hr/> Legal Given Name(s)	<hr/> Mailing Address	
<hr/> Name Used	<hr/> Postal Code	<hr/> Home Telephone
<hr/> Gender (M/F)	<hr/> Birth Date (m/d/y)	<hr/> Grade Level

First Language Spoken: _____
 Program Choice: English French Immersion Français

Office Use Only:
 Proof of Age confirmed (e.g. Birth Certificate for Kindergarten Entry)
 Resident of The Red River Valley School Division (if no, ensure School of Choice or Program Not Offered form is completed and attached)

Father's (or legal guardian's) Information

Mother's (or legal guardian's) information

Name (Last, First)

Address

Mailing address (if different from above)

Work Telephone:

Place of Employment:

Home Telephone:

Other Telephone

Email Address:

Name (Last, First)

Address

Mother's mailing address (if different from above)

Work Telephone:

Place of Employment:

Home Telephone:

Other Telephone:

Email Address

Living Arrangements and Custody Information

Student Resides With:

- Parents
- Mother
- Father
- Guardian
- Foster
- Other: _____

Custody:

- Joint
- Mother only
- Father only
- Guardian
- Other: _____

If the student is in your care as a foster child, please provide the following:

Please provide the name of any person (s) to whom access has been denied by court order:

Agency: _____
 Address: _____
 Worker's Name: _____
 Telephone number: _____

Office Use Only:
 Foster documents confirmed Student In Care intake form attached
 Copy of legal document (denying access) on file at school EDI information attached

If not a Canadian Citizen, student has:

- Student authorization with Landed Immigrant Status
- Student authorization without Landed Immigrant Status
- Refugee
- VISA Student

Brothers & Sisters (Please list in order of age, including preschool and school-aged siblings)

Gender	Name (Last, First)	Date of Birth (MM/DD/YYYY)	School Attending (if applicable)

Medical Information

Please list the student's medical conditions / restrictions (allergies, physical limitations, mental limitations, medications, chronic conditions, etc.)

* It is the responsibility of the parent/legal guardian to keep the school informed as necessary should there be any change to the above.

Does your child wear a MedicAlert® bracelet? yes no If "yes", what is the ID Number? _____

Student's PHIN No.	Family MHSC No.	Family Doctor	Doctor Telephone.	Treaty No.
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Emergency Information

1. _____ Name	_____ Daytime Phone	_____ Other Phone
2. _____ Name	_____ Daytime Phone	_____ Other Phone

Emergency Billet:

This information is required for all Kindergarten to Grade 12 bussed students. In the event that afternoon busses are not running, students will be billeted with town students.

1. _____ Name	_____ Daytime Phone	_____ Other Phone
2. _____ Name	_____ Daytime Phone	_____ Other Phone

Student Services

Are any of the following services currently being provided to your child (or have they in the past)?

- Resource
- Occupational or Physical Therapy
- Guidance
- Psychiatry
- Educational Assistant (Level 2 or 3)
- Mental Health
- Speech Language Pathologist
- Individual Education Plan (IEP)
- Psychology
- Social Worker
- Other _____

* If any have been selected, please complete an Authorization of Release form.

Aboriginal Identity (Voluntary)

Aboriginal Identity Declaration helps to support the efforts of Manitoba Education and Training and school divisions to plan and improve programs in a way that is responsive to Aboriginal learners. (Providing this personal information is voluntary and optional. It is being collected in compliance with section 36(1)(b) of the *Freedom of Information and Protection of Privacy Act* as it is necessary for and relates directly to the activity of Manitoba and school divisions to plan, deliver and improve programs.)

I _____, (name of parent/guardian, please print clearly):

- Am submitting my child's Aboriginal Identity Declaration for the first time
- Am making changes to my child's Aboriginal Identity Declaration
- Already submitted my child's Aboriginal Identity Declaration and have no further changes to make at this time.

Is your child an Aboriginal person, that is, First Nation (North American Indian), Métis, or Inuk (Inuit)? Note: First Nations (North American Indian) include Status and Non-Status Indians. If "Yes", mark the square(s) that best describe(s) your child now:

- Yes, First Nation (North American Indian)
- Yes, Métis
- Yes, Inuk (Inuit)

Which best describes your child's Aboriginal cultural-linguistic identity? Please select up to two choices:

- | | | | |
|--|---------------------------------|--|---|
| <input type="checkbox"/> Anishinaabe (Ojibway/Saulteaux) | <input type="checkbox"/> Ininiw | <input type="checkbox"/> Dene (Sayisi) | <input type="checkbox"/> Dakota |
| <input type="checkbox"/> Oji-Cree | <input type="checkbox"/> Michif | <input type="checkbox"/> Inuktitut | <input type="checkbox"/> Other: _____
(Please Specify) |

Daycare Information:

Please list any day-care or preschool experience your child has had (early years registration only);

Does your child attend a before and/or after school program? yes no

If "yes", please provide the following:

_____	_____
Name of facility or child care provider	Telephone number
_____	_____
Address	Contact Name

Permissions and Certifications

I hereby authorize The Red River Valley School Division to:

Release my child's name and/or picture and/or school work in situations that are school approved, including but not limited to media, school newsletters, awards, sports teams and school web pages.

- Yes No

Allow my child to participate in supervised activities off school property, but within the school's community

- Yes No

Release my contact information to the Parent Advisory Council

- Yes No

Provide emergency medical assistance (including the use of an ambulance) if necessary

- Yes No

To the best of my knowledge, the information provided on this form is complete and accurate.

Date

Signature of Parent or Legal Guardian

Print Name

Office Use Only

Check off as required

- Release of Information Form (Student Services)
- Proof of Age copied for file
- URIS form provided
- School of Choice form provided
- Custody documents copied for file
- Citizenship documents copied for file
- Restricted Access documents copied for file
- Foreign student fee is collected if applicable.
- Medication form
- Transportation Request



Morris School Senior Years Timetable - 2017/18

Student: _____ Grade: _____ Parent Signature: _____

Period/ Time	Semester 1		Semester 2	
1 8:45-9:55 70mins	___ MAT10FTa ___ ENG10Fa ___ PEDF20Fa ___ MAT20Sla ___ HIS30Fa ___ ENG40STa ___ GLO40Sa	T. Lopez 13 R. Ricard 17 A. Ludwig 12 M.Cox 44 H. Penno 28 A. Clayton 33 C. Burton 24	___ MAT10Fa ___ MED11Ga ___ HEC20Gb ___ PEDF20Fb ___ HIS30Fb ___ PHY40Sa ___ GEO40Sa	T. Lopez 13 R. Ricard 17 K. Webb 38 S. Kurylko 12 A. Clayton 33 M. Cox 44 C. Burton 24
9:55-10:00	BREAK		BREAK	
2 10:00-11:10 70mins	___ ENG10Fb ___ MAT10FTb ___ ENG20Fa ___ GEO20Fa ___ PHYS30Sa ___ FAM30Sa ___ MAT40SEa	R. Ricard 17 T. Lopez 13 A. Clayton 33 C. Burton 24 M. Cox 44 K. Webb 38 S. Stevenson 29	___ MED11Gb ___ MAT10Fb ___ ENG20Fb ___ GEO20Fb ___ MAT30SEb ___ FAM40Sb ___ MAT40SPb	R. Ricard 17 T. Lopez 13 A. Clayton 33 C. Burton 24 S. Stevenson 29 K. Webb 38 M. Cox 44
11:10-11:15	BREAK		BREAK	
3 11:15-12:00 *45mins ALL YEAR	___ BAN10Ga/20Sb/30Sc/40Sa ___ VAR10Fa ___ HEC10Ga ___ GCT20Ga ___ INTM35Sa/BRCM35Sa ___ PEER31G/ITRN40S/VLTR30S ___ BIO40Sa ___ GRADE 7/8 PHYS. ED ___ GRADE 7/8 PHYS. ED ___ GRADE 7/8 HCSA	H. Penno 28 D. Maddocks 17 K. Webb 38 T. Lopez 15 T. Lopez 15 B. Dueck NA M. Cox 44 S. Stevenson 12 A. Ludwig 29 B. Lewis 14	___ BAN10Ga/20Sb/30Sc/40Sa ___ VAR10Fa ___ HEC10Ga ___ GCT20Ga ___ INTM35Sa/BRCM35Sa ___ PEER31G/ITRN40S/VLTR30S ___ BIO40Sa ___ GRADE 7/8 PHYS. ED ___ GRADE 7/8 PHYS. ED ___ GRADE 7/8 HCSA	H. Penno 28 D. Maddocks 17 K. Webb 38 T. Lopez 15 T. Lopez 15 B. Dueck NA M. Cox 44 S. Stevenson 12 A. Ludwig 29 B. Lewis 14
12:00-12:55	___ JAZ25Ga/35Sa/45Sa LUNCH		LUNCH	
4 12:55-2:05 70mins	___ SCI10Fa ___ GCT10Ga ___ HCSA11Ga ___ HCSA21Ga ___ HCSA31Ga ___ VAR20Fa ___ LWL10Sa/LWP20Sa ___ ACC30Sa (POD) ___ PED30Fc ___ PED40Fc	R. Ricard 44 T. Lopez 15 B. Lewis 14 B. Lewis 14 B. Lewis 14 D. Maddocks 17 A. Clayton 33 M. Cox 44 A. Ludwig 29 S. Stevenson 12	___ SCI10Fb ___ FRE10Fb/FRE20Fb ___ HCSA11Ga ___ HCSA21Ga ___ HCSA31Ga ___ OUTED30Sb ___ DGP25Sb/DTP35Sb ___ ACC30Sa (POD) ___ PED30Fd/PED40Fd ___ VAR30Sa/VAR40Sa	S. Stevenson 44 A. Clayton 33 B. Lewis 14 B. Lewis 14 B. Lewis 14 R. Ricard 13 C. Burton 24 M. Cox 44 S. Kurylko 12 K. Johnson 17
2:05-2:10	BREAK		BREAK	
5 2:10-3:20 70mins	___ SOC10Fa ___ PEDF10Fa ___ SCI20Fa ___ DGP25Sa/DTP35Sa ___ MAT30SPa ___ ENG40SCa ___ SDLC	K. Stevenson 23 A. Ludwig 12 A. Stevenson 18 C. Burton 24 M. Cox 44 A. Clayton 33 R. Ricard 13	___ SOC10Fb ___ PEDF10Fb ___ MAT20SEb ___ SCI20Fb ___ ENG30SCb ___ ENG30SCj ___ MAT40SAb	K. Stevenson 23 S. Kurylko 12 T. Lopez 15 A. Stevenson 18 R. Ricard 24 A. Clayton 33 M. Cox 44

Morris School

Principal
Mr. Kevin Clace
kclace@rrvsd.ca

Vice-Principal
Mrs. Corinna Derewianchuk
cderewianchuk@rrvsd.ca

www.morris.rrvsd.ca

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2017-2018 Grade 9-12 School Supply List

2016-2017 Senior Years School Supply List:

- Day timer/organizer
- Binder(s)
- Loose leaf
- Dividers
- Duo tangs (for projects)
- Blue or black pens
- Red pens
- Pencils
- Eraser
- Highlighters
- Ruler
- Scientific calculator
- Geometry set for math
- Shorts or track pants, shirt, runners, skates & helmet for all gym classes (change of clothes)
- Student/locker fee - \$30 (this is applicable to ALL students and is due on the first day of school.)

Additional fees (if applicable):

- Grade 9 Students will be supplied with new laptops. If your child is a new student, or chooses to keep their old laptop, there will be a \$200 fee to get that laptop.
- Art Class - \$30.00 fee for supplies
- Home Ec - cost of own sewing project
- Hockey Canada Skills Academy - \$150

All fees are due in September. Please bring in payments on the first day of school or mail in throughout the summer (indicate child's name and what payment is for). Cheques payable to Morris School.

Address: Morris School, Box 548, Morris, MB, R0G 1K0

NOTE: This is a basic list approved by teachers. Other supply needs will be given to students once in classes and throughout the year.

Home of the Mavericks!

324 Toronto Avenue East • Box 548 • Morris, MB • R0G 1K0 • Phone (204) 746-2612 • Fax (204) 746-2126

**RED RIVER VALLEY SCHOOL DIVISION
SCHOOL CALENDAR – 2017 – 2018**

2017

September 4	Labour Day – No Classes	Monday
September 5	Administration Day – No Classes	Tuesday
September 6	Classes Begin	Wednesday
September 15	Strong Beginnings	Friday
September 18	Strong Beginnings	Monday
October 2	Divisional PD Day – No Classes	Monday
October 3	Divisional PD Day – No Classes	Tuesday
October 9	Thanksgiving Day – No Classes	Monday
October 20	MTS PD Day – No Classes	Friday
November 3	School In-service/Administration Day/EA PD – No Classes	Friday
November 17	School In-service/Administration Day – No Classes	Friday
December 22	Last day before Winter Break	Friday

2018

January 8	Classes Resume	Monday
February 5	Semester Turn-around/School In-service – No Classes	Monday
February 19	Louis Riel Day – No Classes	Monday
March 23	Last day before Spring Break	Friday
March 30	Good Friday (During Spring Break)	Friday
April 2	Classes resume	Monday
April 6	School In-service/Administration Day – No Classes	Friday
April 20	School In-service/Administration Day – No Classes	Friday
May 21	Victoria Day – No Classes	Monday
June 28	Last day of classes	Thursday
June 29	Administration Day – No Classes	Friday

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Storm Billet Information

Storm procedures

1. Classes will continue as usual if a storm arises during the day and busses are cancelled. At the end of the day, bus students will be sent to their designated billet. Each year rural students must complete the Storm Billet Information form indicating billeting arrangements in town in case buses are cancelled while students are in school.
Please make arrangements with a friend or relative in town and provide billet information below.
2. If the weather is severe, no K-6 students will be permitted to leave the school unless accompanied by a person at least 12 years old.
3. Parents may pick up students at school prior to 3:20 p.m. Otherwise, pick up your child at their billet's home.
4. Teachers will keep records of student dismissal from their classes. Students will not be dismissed to anyone other than their parents or billet without parental permission. Grade 7 and 8 town students and all senior years students must sign out and declare their destination if leaving on their own. Teachers will remain with each class for supervision until all students have left, then submit their dismissal records to the office.
5. School cancellations are announced on the following radio stations: CFAM-950AM, CJOB-68AM and QX-104FM

Note: If parents are able to pick up their child, they will be asked to sign the student out at the homeroom so that we are aware of who has left the building.

Parents may inform the office or homeroom teacher if an adult, other than those named below, is picking up their children.

It is important that the school be notified of any absences to help us keep track of the whereabouts of students.

Student name: _____

Grade: _____

Billet name and phone number

1) _____ Home ph: _____ Work ph: _____

2) _____ Home ph: _____ Work ph: _____

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MORRIS SCHOOL

Mobile Device Use Policy Form

DATE: _____

STUDENT NAME: _____

PERSONAL MOBILE DEVICE TYPE/BRAND: _____

SERIAL NUMBER OF DEVICE: _____

(In case of theft)

I agree:

- That I am solely responsible for my device use, safety and security.
- That in order to help keep Morris School staff and students safe, I will not audio record, video record or take pictures of any students or staff without their consent at any time during the school day, including field trips outside of the school.
- That in order to keep the Morris School staff and students safe, I will not use my device to communicate electronically, including phone calls, texting, messaging or any other means during class.
- To use my device in a manner agreeable with the staff member in charge of my learning environment. (ex. Volume level on the device, listening to music, etc.).
- I agree to abide by the Red River Valley School Division Technology Use Policy.

Upon failing to live up to my personal mobile electronic device agreement, the staff at Morris School will confiscate the device and return it to my legal guardian at their earliest convenience.

STUDENT SIGNATURE: _____

PRINCIPAL SIGNATURE: _____