



**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](mailto:rrvsd@rrvsd.ca)  
[www.rrvsd.ca](http://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)

\_\_\_\_\_  
Name (Last, First)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
Mailing address (if different from above)

\_\_\_\_\_  
Mother's mailing address (if different from above)

\_\_\_\_\_  
Work Telephone:

\_\_\_\_\_  
Place of Employment:

\_\_\_\_\_  
Work Telephone:

\_\_\_\_\_  
Place of Employment:

\_\_\_\_\_  
Home Telephone:

\_\_\_\_\_  
Other Telephone:

\_\_\_\_\_  
Home Telephone:

\_\_\_\_\_  
Other Telephone:

\_\_\_\_\_  
Email Address:

\_\_\_\_\_  
Email Address

**Living Arrangements and Custody Information**

**Student Resides With:**

**Custody:**

- Parents
- Mother
- Father
- Guardian
- Foster
- Other: \_\_\_\_\_

- 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: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



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. \_\_\_\_\_

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

\* 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: _____<br>(Please Specify) |

**Daycare Information:**

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

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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

Principal  
Mr. Kevin Clace  
kclace@rrvsd.ca

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

www.morris.rrvsd.ca

morris@rrvsd.ca



## 2017-18 Grade K-8 School Supply List

Please see the chart below for school supplies required for students up to Grade 8. There is NO cost for school supplies for students up to Grade 8. The Red River Valley School Division will be covering those costs.

Grades K to 4	<ul style="list-style-type: none"><li>- Backpack</li><li>- <b>Pair of Athletic Runners</b> - Skateboard runners are not safe footwear for Physical Education class as they do not lace snugly or provide proper support for most activities. Hair ties for long hair. Outdoor Activities require proper attire dependent on the weather. If your child does not have outdoor runners for gym they will wear their indoor runners.</li><li>- Kindergarten students <u>only</u> please bring a change of clothing &amp; a paint shirt</li></ul>
Grades 5 & 6	<ul style="list-style-type: none"><li>- Backpack</li><li>- <b>Athletic Runners</b> – Skateboard runners are not safe footwear for Physical Education class as they do not lace snugly or provide proper support for most activities. Hair ties for long hair. Recommended: change of clothes, stick deodorant (NO aerosols), draw string bag for P.E. clothes. Outdoor Activities require proper attire dependent on the weather. If your child does not have outdoor runners for gym they will wear their indoor runners.</li><li>- <b>Grade 5 Laptop Payment</b> – the Grade 5's will be getting new laptops this year. These will be used in the classroom, and will be owned by the student. The cost for those laptops is \$200.</li></ul>
Grades 7 & 8	<ul style="list-style-type: none"><li>- Backpack</li><li>- <b>Athletic Runners</b> – Skateboard runners are not safe footwear for Physical Education class as they do not lace snugly or provide proper support for most activities. Hair ties for long hair. Recommended: change of clothes, stick deodorant (NO aerosols), draw string bag for P.E. clothes. Outdoor Activities require proper attire dependent on the weather. If your child does not have outdoor runners for gym they will wear their indoor runners.</li><li>- <b>\$30 Student Fee</b> – This fee covers the cost of lockers, Student Council, etc. It is a mandatory fee. <i>Students are asked to bring it on the first day of school with their locker agreement signed by parent (attached).</i></li></ul>

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

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**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

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

<b>Grade 9</b>		
	<b>Semester 1</b>	<b>Semester 2</b>
<b>Period 1</b> <i>8:45 - 9:55</i> 70 min.	Math - MAT10TF (A) ELA - ELA10F (B)	Math - MAT10F (A) Media - MED11G (B)
<b>Period 2</b> <i>10:00 - 11:10</i> 70 min.	ELA - ELA10F (A) Math - MAT10TF (B)	Media - MED11G (A) Math - MAT10F (B)
<b>Period 3</b> <b>Non-Semestered</b> <i>11:15 - 12:00</i> 45 min.	Band - BND10S Home Ec. - HEC10G Art - ART10G	
<b>Period 4</b> <i>12:55 - 2:05</i> 70 min.	Science - SCI10F (A) Intro to Graphics - IGT10G (B) Life Works - LFW10S/20S (B) Hockey Academy - HCSA11G (B)	Science - SCI10F (B) French - 10F (A) Hockey Academy - HCSA11G (A)
<b>Period 5</b> <i>2:10 - 3:20</i> 70 min.	Phys. Ed./Health - PED10F (A) Social Studies - SST10F (B)	Phys. Ed./Health - PED10F (B) Social Studies - SST10F (A)

Please complete the following questions. The above timetable will be filled in for you and your child and mailed to you at a later date.

1. Choose one of the following four electives:  French  Hockey Canada Skills Academy  
 IGT  Life Works

2. Choose one of the following three electives:  Band  Art  Home Ec.

Parent Signature: \_\_\_\_\_ Authorized By: \_\_\_\_\_

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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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# RED RIVER VALLEY SCHOOL DIVISION

## Acceptable Use of Technology Form

Acceptable use of the electronic information services requires that the use of these resources be in accordance with the following guidelines and support the education goals of Red River Valley School Division. The student must:

- Use the electronic information system for educational purposes only.
- Not submit, publish, display or retrieve/download any inappropriate material, including material that is defamatory, abusive, obscene, profane, gang-related, sexually threatening, racially offensive or illegal.
- Notify a system administrator if a password is lost or stolen, or if there is reason to believe that someone has obtained unauthorized access to the system.
- Not use the network in a way that would disrupt the use of the network by others, including downloading, storing, distributing or sharing any software or digital file (such as movies, music or text) in violation of copyright laws.
- Understand that e-mail should not be considered absolutely secure or private.
- Understand that computer activities may be monitored and tracked.
- Not reveal student personal information.
- Not use the system to make any unauthorized purchases or to conduct any non-approved business.
- Abide by all copyright, trademark and license restrictions.
- Follow all School Policies and Student Handbooks as written.

The use of computing resources in the Red River Valley School Division is a privilege, not a right. Any action by a user specifically delineated in this document or determined by a system administrator to constitute an inappropriate use of a computer system or network system is subject to consequences. Depending on the seriousness of the user's offense, consequences will be administered as stipulated in the school handbook.

### Consequences of Inappropriate Lab Use at Morris School

First minor violation – range from reprimand to loss of privileges.

Major violation – the student may have computer privileges restricted or withdrawn completely for a period of time or for the remainder of the year. Other consequences may be applied as seen fit by parents, school staff and administration. If equipment is damaged, full restitution will also be required.

I have read, understood and agree to abide by the Computer/Internet Acceptable Use Policy as outlined.

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

\_\_\_\_\_  
Signature of parent or guardian

\_\_\_\_\_  
Date signed



# 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: \_\_\_\_\_