



SACRED HEART CATHOLIC SCHOOL

455 Pigeon Avenue, Williams Lake, BC V2G 4R5
Phone (250) 398-7770 Fax (250) 398-7725 Website www.sacredheartwl.com
admin@sacredheartwl.com principal@sacredheartwl.com

Tuesday, Jan. 28, 2025

Dear Parents and Caregivers,

We are moving forward with our Re-Registrations and new Registrations for next year, to give evidence to our Board of Directors that we have a viable enrollment for 2025-2026. Our Registration fee has increased to \$150 per student, however if we do not have sufficient enrollment to remain open, we will be returning those fees in full. Please see attached schedule of our restructured fees and tuition for next year. If you have any questions, do not hesitate to reach out to myself at principal@sacredheartwl.com or Tara at admin@sacredheartwl.com. We remain hopeful about our path forward, and hope to see all your re-registrations coming in soon!

Peace and blessings,

Amanda Gilmore, Principal



Sacred Heart Catholic School

455 Pigeon Avenue, Williams Lake, BC V2G 4R5

Phone: (250) 398-7770 admin@sacredheartwl.com www.sacredheartwl.com

2025-2026 School Year Registration Information

Dear Parents/Guardians who are **enrolling a NEW STUDENT**:

Welcome to Sacred Heart! At Sacred Heart Catholic School we aim to develop and support the **WHOLE** child-mentally, morally, socially, physically, emotionally, AND spiritually. The staff at Sacred Heart strive for excellence in education and provide an atmosphere in which the Catholic faith permeates all aspects of life in the school. Each child within the school is given the opportunity to develop their potential, not only as an individual, but also as a member of society and more importantly, as a child of God.

To register your child, the following must be completed:

- Return the completed and signed APPLICATION FORM with
 - A copy of Birth Certificate
 - A copy of Care Card
 - A copy of Baptism Certificate (if applicable)
- FAMILY PAYMENT SCHEDULE (*yellow sheet*)
- PRE-AUTHORIZED DEBIT FORM (for tuition - if you are choosing this payment method)
- \$150.00 PER STUDENT REGISTRATION & SUPPLY FEE
- MEAL PLAN FORM
- STATEMENT OF COMMITMENT (*pink sheet*)
- DISCIPLINE FORM (*blue sheet*)
- GENERAL CONSENT FORM (*cream sheet*)
- MEDIA CONSENT FORM
- COMPUTER USE & PRIVACY CONSENT FORM

Please review the forms carefully and call the school if you have any questions. Upon completion of the forms, please submit them to the school office. The principal will be in contact with you to set up an admission interview.

In the event of financial need, please contact the pastor (Father Paul Simms at 250-398-6806) or the principal (Ms. Amanda Gilmore at 250-398-7770).

Thank you for choosing Sacred Heart School. We look forward to partnering with you in education!

Blessings,

Ms. Gilmore
Principal, Sacred Heart Catholic School



APPLICATION FOR ADMISSION FORM

SACRED HEART CATHOLIC SCHOOL
455 Pigeon Avenue, Williams Lake BC V2G 4R5
Phone (250) 398-7770 admin@sacredheartwl.com

OFFICE USE ONLY	
Date of entry: _____	Reg fee: _____
Forms received: _____	
ID# _____	FPS #: _____
PEN #: _____	

PERSONAL INFORMATION:

Student's **legal** names: _____
Surname First Middle

Student's **usual** names: _____
Surname First Middle

To be registered in Grade _____ Sex: M or F

Birth date: _____ Place of birth: _____ Copy of birth certificate
(year/month/day)

Primary language spoken at home: _____

Citizenship: Canadian YES NO If no, specify: _____

Aboriginal ancestry: YES NO Status: YES NO Living on reserve: YES NO

If status & living on reserve: Band name _____ DIA# _____

Child Lives With: Both parents Mother Father Shared Custody Guardian

FAMILY INFORMATION:

Mother's/Guardian's Name: _____

Home phone: _____ Cell: _____ Work: _____

Email address: _____ Occupation: _____

Mailing address: _____
City Postal Code

Home address _____
(if different from above) House number Street City Postal Code

Father's/Guardian's Name: _____

Home phone: _____ Cell: _____ Work: _____

Email address: _____ Occupation: _____

Mailing address: _____
City Postal Code

Home address _____
(if different from above) House number Street City Postal Code

Custody is with: Mother Father Both Other (please specify): _____

Legal Alert: YES NO *If yes, attach copies of legal documents. Date provided: _____

Please contact the school principal to discuss any custody arrangements.

Please outline any special living arrangements: _____

Emergency Contact: _____ Relationship to child: _____

Contact # _____

Emergency Contact: _____ Relationship to child: _____

Contact # _____

Authorized pick up: Please include any other adults (not listed above) that you would like to list for safe pick up of your child(ren):

Name: _____ relationship: _____ contact # _____

Name: _____ relationship: _____ contact # _____

Name of Siblings and Birthdate (DOB):

Name _____ DOB _____ Name _____ DOB _____ Name _____ DOB _____

MEDICAL INFORMATION

Family Doctor: _____ Phone: _____ Care card #: _____ Copy of care card

Dentist: _____ Phone: _____

Is your child currently on any medications: YES NO If Yes: _____

***Note: If your child has prescribed medication, EPI Pen, etc. that requires administering during school hours, please pick up the required form at the office prior to the start of school.**

Physical disabilities/limitations: YES NO _____

Medical Alert: YES NO Medical condition: _____ Medical Alert Bracelet: YES NO

Allergies: YES NO _____

Immunizations up to date: YES NO Last immunization at: _____

RELIGIOUS INFORMATION

Sacred Heart Parishioner YES NO

Father's religion _____ Mother's religion _____

Child's religion _____

Dates:

Baptism: _____ Reconciliation: _____

First Communion: _____ Confirmation _____

EDUCATIONAL INFORMATION

Former school: _____

Address: _____
Number Street City Postal Code

Has this child received Special Education Programming: YES NO

Has this child received Learning Assistance: YES NO

Copy of child's last report card

BUS INFORMATION

Bus Student: YES NO Bus # _____

****IT IS THE RESPONSIBILITY OF PARENT/GUARDIAN TO CONTACT SD 27 BUS GARAGE AND ARRANGE BUS TRANSPORTATION AND REGISTER THEIR CHILD (250-398-3875).***

MEAL PLAN

Will your child participate in the meal program: YES NO

For New Registrations Only:
 Please explain your reasons for seeking admission to Sacred Heart Catholic School:

I certify that this information is complete and correct

DATE _____ PARENT/GUARDIAN SIGNATURE: _____

_____ Pastor's signature	_____ Principal's signature
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Legal Residency of Parent

To be completed and signed by a parent or legal (court-appointed) guardian. If legal guardian, attach copy of court order appointing you as legal guardian. If both parents are deceased, please request a different form.
(Lawfully admitted into Canada)

I am (please X one):

- A Canadian citizen (if not born in Canada, please attach photocopy of citizenship paper/card)
- A landed immigrant (attach photocopy of landed immigrant status paper)
- Lawfully admitted into Canada under one of the following documents (please mark the appropriate box below and attach photocopy of document):
 - Admission as a refugee claimant
 - A person claiming refugee status who has a letter of no objection.
 - Student authorization (student visa) for two or more years (or issued for one year but anticipated to be renewed for one or more additional years)
 - Employment authorization (working permit) for two or more years (or issued for one year but anticipated to be renewed for one or more addition years)
 - A person carrying out official duties as a diplomatic or consular official (with a foreign representative acceptance counterfoil in his/her passport)
 - Other - Document description: (must be cleared with Immigration Canada) _____

(Residency in British Columbia)

I am a resident of British Columbia (please X one):

- Yes Residency address: _____
- No I am not a resident of British Columbia

Confirming signature:

Parent/Legal Guardian's Name (printed): _____

Parent/Legal Guardian's Signature: _____ Date: _____

Declaration

Please X all that apply:

- I give permission for the transfer of all information and documentation pertaining to my child as named below if transferring to/from a BC public school, or a school outside of BC.
- I give my consent for the release of my name, phone number and address for school communication purposes, such as parent support group and classroom phoning committees, etc.
- I give my permission for my child to participate in school field trips and/or other related trips (consent forms will be sent home to be signed for each activity/event where students leave the school grounds.)

I agree with these conditions. I will contact the school if I want to change any of the above conditions at any time.

Parent/Legal Guardian's name: _____ Student name: _____

Parent/Legal Guardian's signature: _____ Date: _____

**SACRED HEART CATHOLIC SCHOOL
FAMILY PAYMENT SCHEDULE**

FPS # _____

Family name: _____	Student names: _____ Grade _____
	Student names: _____ Grade _____
Name for tax receipt: _____	Student names: _____ Grade _____
Name of the First Nations community sponsoring your child(ren): _____	
If your child is sponsored by a first nations community, please sign and date the bottom of this form.	

ANNUAL TUITION RATE 2025 - 2026

1 child family	\$ 3,880
2 child family (25% discount for 2nd child)	\$ 6,790
3+ child family (25% discount for 2nd child, 50% discount for 3rd child)	\$ 8,730

1 - REGISTRATION & SUPPLY FEE

- \$ 150 per student non-refundable fee. This is payable at the time of registration. This admin fee also covers all school supplies for child for the 2025 - 2026 school year.

2 - CHOOSE A TUITION PAYMENT METHOD

- Lump Sum Payment Must be paid on or prior to September 15, 2025. Families that pay by lump sum will be entered into two draws for \$300 in grocery cards.
- Pre-Authorized Debit 10 equal payments: 5th of month or 22nd of month
- A new pre-authorized debit form must be completed each school year. Please complete the attached form and attach your banking information.
- Other - Please specify _____
(with the approval of the school office)

3 - FINANCIAL COMMITMENT

We pledge to pay the tuition for the child(ren) named in the manner chosen above.

Parent or Guardian Name: _____ Signature: _____

Date: _____

PREAUTHORIZED DEBIT FORM

Complete all sections to instruct your financial institution to make payments directly from your account. Return the completed form to us, **with a blank cheque marked "void"**.

Payee:

Sacred Heart School
455 Pigeon Avenue
Williams Lake, BC V2G 4R5

Telephone:

(250) 398-7770

Financial Institution Branch:	
Name of Financial Institution:	Address:

Transaction Information:	
Transaction Type: <u>41510</u>	Personal <input type="checkbox"/> Business <input type="checkbox"/>
Cross reference: _____	Office Use Only
First due date: _____	Final due date: _____
mm dd yy	mm dd yy
Frequency: _____	\$ Amount: _____

Payor:	
Names of Account Holders:	Address:
_____	Office Use Only

I (we) hereby authorize **Sacred Heart School** to draw on my (our) account with the afore-mentioned financial institution, for the following purpose, **Tuition and School Fees**.

By signing this authorization, I (we) acknowledge that I (we) understand I (we) are participating in the Pre-authorized Debit Plan established by **Sacred Heart School**, and I (we) accept participation in the PAD plan upon the terms and conditions set herein.

I (we) consent to the disclosure of any personal information that may be contained in this authorization to the financial institution that holds the account for **Sacred Heart School** with the pre-authorized debit to the extent that such disclosure of personal information is directly related to and necessary for the proper application of Rule H4 of the Canadian Payments Association Rules:

Signature of Account Holder

Date:

Signature of Account Holder

Date:

See over for terms and conditions



Sacred Heart Catholic School MEAL PROGRAM 2025 – 2026

The meal plan fees for the 2025 – 2026 school year will be **\$110.00 per month** per child. The total yearly fee is \$1,100.00.

The meal plan monthly fee is calculated based on a monthly fee of \$115.00 per month and factors in a lower fee for the shorter months in the school year (September \$105.00, December \$95.00, March \$95.00).

The meal program start date for 2025-2026 school year is to be confirmed. A sample menu of the meals served is attached. All lunches are served with a healthy side of vegetables (raw or roasted, salad, veggies & dip) and/or fruit.

Refunds are not offered for days that students are absent from school.

This meal plan does not include recess snacks.

FAMILY NAME: _____

CHILDREN: _____

- NO** my child(ren) will NOT be participating in the meal program
- YES** my child(ren) WILL BE participating in the meal program

CHOOSE A PAYMENT METHOD

Lump Sum Payment Must be paid prior to September 30, 2025.

OR

Monthly Payments Must be paid by the 5th of each month

Cash Credit card/Debit E-transfer

Parent or Guardian Name: _____ Signature: _____

Date: _____



Sacred Heart Catholic School

Family Statement of Commitment

Philosophy

“Motivated by a Christ-centered vision of humanity and human history, our school promotes the formation of the whole person. Such formation embraces not only intellectual, but also physical, emotional, moral, and spiritual dimensions of human growth. Intellect, emotions, creative ability, and cultural heritage have a place in the life of the school. Human knowledge and skills are recognized as precious in themselves but find their deepest meaning in God’s plan for creation.” From PHILOSOPHY OF EDUCATION FOR CATHOLIC SCHOOLS IN THE PROVINCE OF BC by Catholic Bishops of BC.

Partners (home, school, parish) in Catholic education must work together to provide an environment where faith and learning go hand in hand in leading young people to be the best they can be.

The following statements support the goals and philosophy of our Catholic school and need to be accepted and support by all members of the community. Read them carefully. They ask you to make a commitment to the values and ideals of our school community. If you have any question or concerns regarding this commitment, please bring them to the principal, pastor or the chairperson of the school council who will gladly discuss them with you.

By returning the signed statement with your completed application, you accept the responsibility of this commitment.

- Parents and guardians agree that they and their children will respect Catholic denominational standards as contained in the Catechism of the Catholic Church
- All students are required to participate in our religious education curricular and co-curricular programs including liturgical celebrations, retreats, prayer, etc.
- Parents/Guardians are expected to support the religious education program and participate in it as required.
- Regular school attendance and full participation in all aspects of the academic program of the school are required of every student. Each student is expected to strive toward the development of his / her full academic potential.

- Each family is expected to support and participate in the fund-raising activities of the parish/school. This means each family shares in the responsibility of educating our Catholic children.
- Each student is expected to know and follow school policies on behaviour.
- Parents/Guardians are expected to know and support school policy and procedures.
- Parents/Guardians agree to accept the responsibility for the cost of tuition, supplies, and other school activities.

If any of these conditions are not met the school reserves the right to refuse admission or remove the student from the school.

I have read and understand the above expectations and commitments and I hereby accept them as stated.

Student Name: _____ Date: _____

Parent Names (printed): _____

Parent Names (printed): _____

Parent/Guardian Signatures: _____

Parent/Guardian Signatures: _____

PLEASE READ BOTH PAGES OF THIS
POLICY AND SIGN THE BACK.

Sacred Heart Catholic School Discipline Policy

The goal of the SHCS Discipline Policy is to provide a safe and cooperative environment under which the students can grow to Christian maturity and complete self-discipline. Whenever possible, restorative justice practices will be used to help students repair any harm that they may have caused, whether intentionally or inadvertently. Restorative justice practices are non-adversarial and provide those involved with the opportunity to learn about the consequences of their actions and to make appropriate amends. All staff are familiar with restorative justice practices including the use of restorative language, classroom groups, mediation, and forums. Use of any of these practices requires that students accept responsibility for their actions and are willing to work together to come up with appropriate consequences. All minor infractions will be initially dealt with using restorative practices. Individual classrooms will have their own rules and procedures that are based on and connected to our discipline policy, but are tailored to specific class needs.

Minor Infractions include:

- not following school rules
- misuse of playground equipment
- rough or unsafe behavior
- vulgar language
- fooling around in the building
- derogatory comments and gestures/put downs towards others
 - taunting and teasing
 - disruptive behavior
 - disrespect/ rudeness towards or arguing with staff.

Consequences for minor infractions will be jointly determined by all those involved and will focus on making restitution for the infraction (i.e. natural consequences that help to fix what was broken and/or make things better). These mutually agreed upon consequences may include:

- scheduled times for the student(s) to help in/around the school (during what would otherwise be free time)
- time-limited loss of privilege
- time-out in a supervised area
- other appropriate consequences

In situations where students choose not to take part in restorative practices, the teacher and/or supervisor and/or principal will decide on consequences (i.e. the ways that restitution might be made).

Regardless of the specifics of an incident or its consequences, a Minor Infractions Report will be completed and a copy will be sent to the parents, teacher, and office.

***Three minor infractions within two weeks will add up to a major offense.**

Major Offenses include:

- use of drugs or alcohol or weapons
- theft or dishonesty
- gross insubordination or willful disobedience or defiance
- verbal abuse including gestures
- intentional physical violence
- irresponsible actions causing bodily harm (e.g. spitting & biting)
- truancy and leaving the school grounds without permission
- vandalism
- three minor infractions within a 2-week period

A Major Offense Discipline Report is completed for each major offense. Major offenses are recorded from September to June and accumulate during the school year.

Consequences for major offenses are as follows:

1. First incident:

After the first offense, the student is reported immediately to the Principal who meets with the student and contacts the parents. The student is sent home for the remainder of the day. Prior to the student's return to school, there will be a meeting with the student, parent(s) and Principal to create an action plan, which may include a restorative justice forum. This forum will determine appropriate consequences for making restitution and suggestions for what will happen if a second offense occurs. If the student is not willing to participate in a forum, consequences will be at the discretion of the school staff and may include up to five days of at-school detentions. All students who are disciplined for a first offense will receive the warning that a second major offense may result in a suspension.

2. Second incident:

The second time the student is reported for a major offense, the parents will be called to take the student home and the student may be suspended for three days. While suspended, the student may not participate in any school events. Prior to returning to school there will be a meeting with the student, parent and Principal to create an action plan, which may again include a restorative justice forum. This forum will determine appropriate consequences for making restitution and will include a consideration of those recommendations that arose from the first forum. If the student is not willing to participate in a forum, consequences will be at the discretion of the school staff and may include up to five days' loss of free time and/or five days of at-school detentions. All students who are disciplined for a second offense will receive the warning that a third major offense may result in an expulsion.

3. Third incident:

A third offense may result in expulsion where parents will be called to take the student home and a meeting will take place with the student, parent and Principal. Expulsion means that the student will be removed from the school permanently; they may be appealed to the Local School Committee.

In extraordinarily serious situations, the Principal may summarily suspend a student and parents will be notified to pick up the child at the school. Prior to returning to school there will be a meeting with the student, parent and Principal to create an action plan. Appropriate consequences will follow.

Bus Line Expectations

Please note that after dismissal, all bus students must go promptly to the bus line at the sidewalk on the upper field. When the bus line bell rings there is a supervisor to lead the students to Marie Sharpe School bus pick up area. Students walking to Marie Sharpe on the bus line are expected to: walk in twos, stay together, walk on the sidewalk only, and follow the instructions of the supervisor. These rules are for the safety of all students who are walking to Marie Sharpe School to catch their bus home or students who are walking down to join the Rec and Roll program. Failure to follow these rules may result in the student being suspended from traveling on the bus/bus line.

I have read and acknowledge the above Discipline Policy of Sacred Heart Catholic School.

STUDENT NAME: _____ Date: _____

Parent/Guardian Name (printed): _____ Signature: _____

Parent/Guardian Name (printed): _____ Signature: _____



GENERAL CONSENT FORM 2025-2026 Sacred Heart Catholic School

FOR CLASS TRIPS TO SACRED HEART CHURCH, ANNUAL TERRY FOX RUN, AND FOR DAILY PHYSICAL ACTIVITIES (DPA) IN THE NEIGHBOURHOOD

To the Parent(s)/Guardian(s) of: _____ Grade 2025-2026: _____

Please read the contents of this Consent and Acknowledgement of Risk form. Please return this signed consent form to the school.

PROGRAM/ACTIVITY INFORMATION

OFF SITE ACTIVITIES:

Religion Program – Going to Mass & other events at the church. Service projects at hospital, Deni house, etc.

Terry Fox – Annual school Terry Fox Run where Gr 4-7 students will walk/run outside the school property around the block (Pigeon Ave, Comer St., 2nd Ave, Gibbon St.) Kindergarten – Grade 3 will walk/run on school property.

Daily Physical Activities (DPA) – This is part of our Physical Education program. Occasionally classes may go on walks or runs in the neighbourhood as part of DPA.

Other subject areas: Science & Social Studies; models and inspirations for art classes, community designs, habitats & nature

PURPOSE OR EDUCATIONAL GOAL(S): To enrich the Religion program; to enrich the DPA program; enrich Art, Science and Social Studies programs.

METHOD OF TRANSPORTATION: Walking & running

SUPERVISORY ARRANGEMENTS: All off-site activities are supervised by classroom teachers.

TOTAL NO. OF SUPERVISORS: Minimum of 2 per class (including the principal, classroom teacher, and/or educational assistant)

BOARD RESPONSIBILITIES

The board will make every reasonable effort to ensure or ascertain that:

- The staff, volunteers and/or service providers involved are suitably trained and qualified.
- The students are adequately supervised over all aspects of the program/activity.
- The location(s) used are appropriate and safe for the activity(is) and group.
- Equipment used has been inspected and deemed appropriate and safe.
- A Safety Plan is in place to identify and manage known potential risks.
- An Emergency Plan is in place to deal with an injury or illness to any of the students.

POTENTIAL KNOWN RISKS

Potential known risks include (but are not limited to) the following: Injuries related to slips, trips, and falls (example: blisters, sprains/strains, scraps, cuts); becoming separated/lost from group, allergic reactions to natural toxins in the environment; bug bites, suffering effects related to the weather (cold, hot, wet)

CONSENT AND ACKNOWLEDGEMENT OF RISK

Destination/Activity/Program: Sacred Heart Catholic Church for Mass and other visits as determined by the classroom teacher. Daily Physical Activities that take the class off site; Annual Terry Fox Run; enrichment of Science, Socials & Art classes.

Dates: 2025-2026 school year

- I acknowledge my right to obtain as much information as I require about this program or activity and associated risks and hazards, including information beyond that provided to me by the school or board.
- I freely and voluntarily assume the risks/hazards inherent in the program/activity and understand and acknowledge that my child may suffer personal and potentially serious injury arising from his/her participation.
- My child has been informed that he/she is to abide by the rules and regulations, including directions and instructions from the school's and/or service provider's administrators, instructors, and supervisors over all phases of the program/activity.
- In the event my child fails to abide by these rules and regulations, disciplinary action may require his/her exclusion from further participation, or that I be contacted to have him/her picked up, unless I have specified other transport arrangements.
- I acknowledge that it is my responsibility to advise the Lead Teacher of any medical and/or health concerns of my child that may affect his/her participation in the stated program or activity.
- I acknowledge that the trip supervisors may secure transport to emergency medical services as they deem necessary for my child's immediate health and safety, and that I shall be financially responsible for such services.
- Based on my understanding, acknowledgement, and consents as described herein,

(Name of Student) _____ (Date of Birth) _____ has my permission to participate.

Today's Date: _____ Parent/Guardian Name (print): _____ Signature: _____



SACRED HEART CATHOLIC SCHOOL

455 Pigeon Avenue
Williams Lake, BC V2G 4R5
Phone (250) 398-7770

Media Consent Form School Year 2025 – 2026

Notice to Parents and Students re: Outside Media in Schools and Personal Information Consent

Please complete, sign, and return this form to Sacred Heart with the rest of your child(ren)'s registration/re-registration package(s) for the new school year.

This document is to make you aware of the ways in which media may be used at Sacred Heart. Please read through each of the following examples and sign the bottom of this form to confirm that you have read it and to indicate your wishes regarding your child's inclusion in media releases.

Media (including radio, television, newspapers, and other print and online media) are sometimes permitted or invited to come to school activities and allowed to take photos, video, or conduct interviews with students for the purpose of promoting the public understanding of school programs. School staff cannot control news media access, photos, or videos taken by the media or others in public locations (such as on field trips or off school grounds) or for school events open to the public such as sporting events, student performances, etc.

Schools are authorized to collect, use, and share student personal information that is directly related to and necessary for their educational functions. Sacred Heart Catholic School is seeking your consent to collect, keep, use and share photographs, videos, images, and/or names of students in a variety of publications (school newsletters etc.) and on the school or CISKD website for education-related purposes (such as recognizing and encouraging student achievement, building the school community, and informing others about the school, parish, and diocesan programs and activities).

See the overleaf of this page to make your wishes known regarding the inclusion of your child(ren)'s image(s) in media releases from Sacred Heart and/or CISKD (the diocesan body of Catholic schools to which Sacred Heart belongs).

Please read and complete all parts – see back of this page.

TURN OVER TO PAGE 2

For each of the circumstances described below, please check A or B (not both).

A. ____ I DO CONSENT to the use and disclosure of my child's name and/or image by outside media (newspaper, radio, television etc.) for this school year (for example, a newspaper reporter taking pictures at an assembly).

B. ____ I DO NOT CONSENT to my child's image or name being published by outside media (newspaper, radio, television etc.). I REQUEST that the school district and its staff take all reasonable steps to avoid having my child's image or name collected or published by outside media when they are present in school or at school activities at the invitation of the school or school district. I MAY choose to override this Notice by giving my consent in a specific circumstance. Unless withdrawn, this consent is effective immediately and lasts until September 30 of the next school year.

A. ____ I DO CONSENT for the school or to collect, use, and share my child's name and/or image for purposes of School and CISKD Communications such as school newsletters, websites, videos etc. (for example, your child's picture on the Sacred Heart website). I understand that images and information posted on the internet may be stored and accessed outside of Canada. This consent may be withdrawn at any time in writing, but withdrawal of consent does not require the school or CISKD to take any steps to withdraw from publication any previously published material. Unless withdrawn, this consent is effective immediately and lasts until September 30 of the next school year.

B. ____ I DO NOT CONSENT to the use and disclosure of my child's name and/or image for the above purposes for this school year.

Student's Name: _____
(please print)

Parent's Name: _____
(please print)

Parents, please check mark the following:

- I acknowledge receiving this notice.
- I have completed the above two sections.

Parent/Legal Guardian* Signature: _____

*For parents who have court orders describing their parental rights, this form should be signed by a parent who has the right to exercise the student's privacy protection rights.

Please contact the principal or the school office if you have any questions about this form.



SACRED HEART CATHOLIC SCHOOL

455 Pigeon Avenue

Williams Lake, BC V2G 4R5

Phone (250) 398-7770 admin@sacredheartwl.com

Computer Use & Privacy Consent Form School Year 2025-2026

Notice to Parents and Students re: Computer User Responsibilities & Privacy Consent

All students must have a signed parent consent form (as per this document) to access online learning resources. Please complete, sign, and return this form to Sacred Heart with the rest of your child(ren)'s registration/re-registration package(s) for the new school year. If you do not consent to one, or both, of the sets of responsibilities outlined in this document, please discuss your objections with the school Principal.

Computer User Responsibilities

As a Sacred Heart student, all student users will keep confidential their passwords to online learning resources. Students will not disclose their password to anyone other than their teacher. When accessing online teacher-approved learning resources, all student users will maintain the same standards of good taste as it exists in their classrooms. Users will refrain from the use of profanity, making comments that would offend others, bullying, or other harassing behavior.

Student users agree not to sell, publish or commercially exploit information obtained from online information services unless written permission is obtained from their school Principal or designate. Student users agree not to upload/download copyrighted software or media, divulge security codes, damage data, or engage in any other illegal activities. Users will not use their access privileges for sales promotion, or broadcasting information, without the approval of their school Principal or designate. Users will not attempt unauthorized access to online information services.

After reading these responsibilities and reviewing them with your child(ren), please share your wishes regarding your child(ren)'s use of computer resources.

Please check A or B (not both).

A. ____ I DO CONSENT to the review of the Computer User Responsibilities with my child for this school year.

B. ____ I DO NOT CONSENT to my child using computer resources for this school year. I REQUEST that Sacred Heart School and its staff take all reasonable steps to avoid having my child access computer resources while at school. Unless withdrawn, this consent is effective immediately and lasts until September 30 of the next school year.

TURN OVER TO PAGE 2

Computer / Privacy Consent

Sacred Heart School uses online learning applications (e.g. web-based email, online video, online educational sites where students are registered, and document collaboration tools). The online learning applications may involve personal information which will be collected by Sacred Heart School for educational purposes and shared to the online service. This notice is provided to you because of British Columbia's Personal Information Protection Act.

All attempts will be made to ensure that student data is stored in Canada. Some educational applications are available only with storage of student data on secure servers located outside of Canada (eg. Bloomz). While stored outside of the country, the information may be subject to the laws of the foreign jurisdiction, including, in the United States, the USA Patriot Act. Privacy legislation requires that we inform you of this fact and obtain your consent to this arrangement.

After reading this privacy notification, please share your wishes regarding your child(ren)'s use of online resources and complete and sign the bottom of this page.

Please check A or B (not both).

A. ____ I DO CONSENT for the school to share my child's personal information with online learning services (the Internet).

B. ____ I DO NOT CONSENT to the use and disclosure of my child's name and/or personal information to online learning services for this school year. Unless withdrawn, this consent is effective immediately and lasts until September 30 of the next school year.

Student's Name: _____
(please print)

Parent's Name: _____
(please print)

Parents, please check mark the following:

- I acknowledge receiving this notice.
- I have completed the above two sections.

Parent/Guardian* Signature: _____

*For parents who have court orders describing their parental rights, this form should be signed by a parent who has the right to exercise the student's privacy protection rights.