

Registration Check list – for office use

Student name: _____

Teacher/Grade: _____

Date of Registration: _____

	N/A	Yes	No
1. My Ed BC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. PR Index Card made	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Label for file	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Contact sheets x 3 – Emergency binder	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Fire drill sheets updated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Excel (CPE student/teacher/house team)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. House team _____ T-shirt _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Permission forms (teacher binder)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Library/computer number	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Legal documentation (if required)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Birth certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Medical #	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Catchment area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Proof of address	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Allergy awareness letter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>