Collège Miles Macdonell Collegiate Registration

Grade 10

STUDENT NAME: _____

(Please print First Name & Last Name)

Please take note of the following River East Transcona School Division policies:

RETSD Technology Use form IJND-E1

Media Release Policy form KDDB-E1

Both policies can be found at www.retsd.mb.ca. Parents/guardians are assumed to be in agreement.
If you choose to **opt out** regarding these policies, appropriate forms will need to be submitted to the office.

DOCUMENTS REQUIRED WITH REGISTRATION:

Proof of Residency of legal guardian**: (2 pieces required)**

- ☐ Driver's Licence
- ☐ Manitoba Health Card (verified)
- ☐ Utility Bill (Name and corresponding address)
- ☐ Tenancy agreement (duly signed)
- ☐ Offer to purchase documents (completed – signatures)

School Records **(required)**

- ☐ Transcript of marks

Expression of Interest for future participation (if applicable):

- ☐ sTeam/sTiam – Expression of Interest
- ☐ Technical Vocational – Hairstyling Expression of Interest (taken at Kildonan East Collegiate)

School of Choice form (if applicable):

- ☐ In Division/Out of Designated School Boundary
- ☐ Out of Division/District

Guardianship (if applicable):

- ☐ Court documents (Interim and/or Final Order, Variance Orders may also be applicable)
- ☐ Voluntary Placement Agreement (VPA)
- ☐ Child in Care form

Proof of Age (for students who are new to the division):

- ☐ Birth Certificate
- ☐ Baptismal Certificate
- ☐ Passport
- ☐ Treaty Card
- ☐ Certificate of Birth registration, signed by Director of Vital Statistics

2026-2027 School Year

In Division and Out of Designated School Boundary registrations accepted on or after March 2, 2026
Out of Division/District registrations accepted on or after May 1, 2026

OFFICE USE ONLY

Date: _____ Admin Signature:_____

☐ RE	☐ 9	☐ In Catchment	☐ Yes
☐ FI	☐ 10	_____	
☐ sTeam	☐ 11	☐ Out of Catchment	☐ No
☐ sTeam FI	☐ 12	_____	
☐ EAL		☐ Out of Division	
		_____	

STUDENT REGISTRATION

River East Transcona SCHOOL DIVISION

This personal information is being collected under the authority of The Public Schools Act and will be used for educational purposes. It is protected by the Protection of Privacy provisions of The Freedom of Information and Protection of Privacy Act. If you have any questions about the collection, contact the superintendent of River East Transcona School Division, 589 Roch St., Winnipeg, MB, R2K 2P7, Phone: 204.667.7130.

STUDENT INFORMATION

PLEASE PRINT

School year: 2026/2027

School name: Collège Miles Macdonell Collegiate

Applying for Grade _____

Usual LAST name: _____ Usual FIRST name: _____ Usual MIDDLE name: _____

Legal LAST name: _____ Legal FIRST name: _____ Legal MIDDLE name: _____

Legal gender: ☐ Male ☐ Female Pronouns: _____

Identifying gender (if applicable): ☐ Trans male ☐ Trans female ☐ Two-Spirit ☐ Gender non-conforming

Birth date: (mm/dd/yy) _____ Language spoken at home: _____

Home address: Apt. # _____ House # _____ Street: _____

City: _____ Province: _____ Postal code: _____

Box #/Group #/RR #: _____ Student home #: _____ Student cell #: _____

Student Manitoba Medical #: Personal # (9-digit) ☐☐☐☐☐☐☐☐☐ Family # (6-digit) ☐☐☐☐☐☐

Are you a resident of River East Transcona School Division? ☐ Yes ☐ No *(If* no*, complete and attach a schools of choice application)*

Is the student a high school graduate? ☐ Yes ☐ No Last school attended: _____

If not a Canadian citizen, please identify the CIC (Citizen and Immigration Canada) authority:

☐ A) Permanent resident ☐ B) Refugee claimant ☐ C) Work permit ☐ D) Study permit ☐ E) Other _____

Date entered Canada: (mm/dd/yy) _____

OFFICE: A–C are provincially funded students

CONTACT INFORMATION

The following primary and emergency contact information will be used in the event of an emergency or for critical, time-sensitive information using our mass notification system. An email address must be provided for each contact to be able to receive notifications from this system.

Custody: Are there any legal restrictions to this student? ☐ Yes ☐ No *(If* yes*, a copy of legal documents must be on file at the school)*

List in order of priority to call:

1st/primary contact

LAST name: _____ FIRST name: _____ Relationship: _____

Address: ☐ Same as above Other: _____ Postal code: _____

Employer: _____ Work phone: _____ Ext.: _____

Home phone: _____ Unlisted? ☐ Yes ☐ No Cell: _____ Email: _____

STUDENT REGISTRATION

Legal guardian? ☐ Yes ☐ No Can pick up student? ☐ Yes ☐ No Has custody of student? ☐ Yes ☐ No

Send additional report card? ☐ Yes ☐ No This contact is restricted? ☐ Yes ☐ No

Phone number to call in case of emergency: _____

Upon registration, parent portal login information will be provided by the school.

2nd contact

LAST name: _____ FIRST name: _____ Relationship: _____

Address: ☐ Same as above Other: _____ Postal code: _____

Employer: _____ Work phone: _____ Ext.: _____

Home phone: _____ Unlisted? ☐ Yes ☐ No Cell: _____ Email: _____

Legal guardian? ☐ Yes ☐ No Can pick up student? ☐ Yes ☐ No Has custody of student? ☐ Yes ☐ No

Send additional report card? ☐ Yes ☐ No This contact is restricted? ☐ Yes ☐ No

Phone number to call in case of emergency: _____ Would like parent portal access? ☐ Yes ☐ No

3rd contact

LAST name: _____ FIRST name: _____ Relationship: _____

Address: ☐ Same as above Other: _____ Postal code: _____

Employer: _____ Work phone: _____ Ext.: _____

Home phone: _____ Unlisted: ☐ Yes ☐ No Cell: _____ Email: _____

Legal guardian? ☐ Yes ☐ No Can pick up student? ☐ Yes ☐ No Has custody of student? ☐ Yes ☐ No

Send additional report card? ☐ Yes ☐ No This contact is restricted? ☐ Yes ☐ No

Phone number to call in case of emergency: _____ Would like parent portal access? ☐ Yes ☐ No

Daycare or other contact

LAST name: _____ FIRST name: _____ Relationship: _____

Address: ☐ Same as above Other: _____ Postal code: _____

Employer: _____ Work phone: _____ Ext.: _____

Home phone: _____ Unlisted? ☐ Yes ☐ No Cell: _____ Email: _____

Legal guardian? ☐ Yes ☐ No Can pick up student? ☐ Yes ☐ No Has custody of student? ☐ Yes ☐ No

This contact is restricted? ☐ Yes ☐ No Phone number to call in case of emergency: _____

STUDENT REGISTRATION

River East Transcona SCHOOL DIVISION

STUDENT TECHNOLOGY ACCESS AT HOME

Does the student have wireless Internet access at home? ☐ Yes ☐ No

Select the device type(s) the student has access to at home.

☐ Chromebook ☐ Desktop
☐ Laptop ☐ Tablet
☐ Mobile phone (student-owned) ☐ No device
☐ Mobile phone (parent-owned)

Would the device(s) be brought to school? ☐ Yes ☐ No

SIBLINGS

Please list the full legal names of all siblings of the student who are attending any RETSD schools—only those for whom the parent(s)/guardian(s) listed on pages 1 and 2 are *legal* guardian(s).

SIGNATURES

The following signatures verify that the above information is true and accurate. Upon transfer/withdrawal of the student, the pupil file will be forwarded to the next school of attendance.

☐ I consent to receive, via email, information in the form of newsletters, school updates, and announcements regarding division and school activities, including fundraising and promotions (if at any time you wish to be removed from our email list, please contact the school office).

Email address: _____

Parent/guardian: _____ Student (if 18 or older): _____

Date: _____

INDIGENOUS IDENTITY DECLARATION

Indigenous 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 Indigenous 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 (FIPPA) 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 Indigenous Identity Declaration for the first time

☐ Am making changes to my child's Indigenous Identity Declaration

☐ Already submitted my child's Indigenous Identity Declaration and have no further changes to make at this time

Is your child an Indigenous person, that is, First Nation (North American Indian), Métis, or Inuk (Inuit)? If yes, check the box(es) that best describe(s) your child now *(Note: First Nations (North American Indian) include Status and Non-Status Indians)*:

☐ Yes, First Nation (North American Indian)

☐ Yes, Métis

☐ Yes, Inuk (Inuit)

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

☐ Anishinaabe (Ojibway/Saulteaux)
☐ Oji-Cree
☐ Ininiw
☐ Michif
☐ Dene (Sayisi)
☐ Inuktitut
☐ Dakota
☐ Other: Please specify: _____

MEDICAL QUESTIONNAIRE

Please complete the following *(specify* yes *if physician-diagnosed)*

1. Anaphylaxis	☐ Yes ☐ No	
2. Anaphylaxis—has EpiPen prescribed	☐ Yes ☐ No	
3. Asthma	☐ Yes ☐ No	
4. Asthma—has inhaler prescribed	☐ Yes ☐ No	
5. Bleeding (i.e., hemophilia, Von Willebrand disease)	☐ Yes ☐ No	_____
6. Cardiac condition	☐ Yes ☐ No	
7. Catheterization	☐ Yes ☐ No	
8. Central line	☐ Yes ☐ No	
9. Diabetes	☐ Yes ☐ No	
10. Gastrostomy	☐ Yes ☐ No	
11. Intermittent catheterization	☐ Yes ☐ No	
12. Medication	☐ Yes ☐ No	_____
13. Nasogastric tube	☐ Yes ☐ No	
14. Osteogenesis imperfecta	☐ Yes ☐ No	
15. Ostomy	☐ Yes ☐ No	
16. Oxygen	☐ Yes ☐ No	
17. Seizure disorder	☐ Yes ☐ No	
18. Steroid dependence	☐ Yes ☐ No	
19. Suctioning (A)—tracheal suctioning	☐ Yes ☐ No	
20. Suctioning (B)—oral/nasal suctioning	☐ Yes ☐ No	
21. Tracheostomy	☐ Yes ☐ No	
22. Ventilator	☐ Yes ☐ No	
23. Other intervention/condition/diagnosis (not listed)*	☐ Yes ☐ No	_____

***Other health condition(s) must be physician-diagnosed with supporting documentation provided**

STUDENT REGISTRATION

This medical information is being collected so that appropriate health-care plans and programming may be developed. This information will only be shared with appropriate individuals. This information is protected by The Personal Health Information Act. Questions should be directed to the school principal.

SUPPORT SERVICES

Please indicate if the student has utilized any of the following services

☐ Resource ☐ School counsellor

☐ Reading ☐ Psychology

☐ Psychiatry ☐ Speech & language

☐ Social work ☐ Occupational therapy

☐ Physiotherapy ☐ Outside agency

☐ Child in care ☐ Other _____

If any services above are checked (✓), please complete details below

Name of agency/support service: _____ Contact person: _____

Address: _____ Phone: _____

Briefly describe the reason for service: _____

_____

Name of agency/support service: _____ Contact person: _____

Address: _____ Phone: _____

Briefly describe the reason for service: _____

_____

The support services information is being collected so appropriate educational services may be provided for your child. This information will only be shared with appropriate individuals. This information is protected by The Freedom of Information and Protection of Privacy Act. Questions should be directed to the school principal.

Collège Miles Macdonell Collegiate
2026 - 2027
Grade 10 course selection

STUDENT NAME: _____

Please print clearly (First Name & Last Name)

INSTRUCTIONS:
1. **Please check off ☑ the appropriate program and select the Manitoba compulsory choices within the program section**
2. **Please choose option courses. Three (3) for English Program, Two (2) for French Immersion Program**

ENGLISH PROGRAM - Compulsory Courses

✓	English Language Arts 20F	E20F
✓	Physical Education 20F	PEH20F
✓	Geography 20F	G20F
✓	Science 20F	S20F

Choose a Mathematics course	
Essential Mathematics 20S	M20SE
Intro to Applied and Pre-Cal 20S	M20SI

* 3 option courses will be scheduled

FRENCH IMMERSION PROGRAM - Compulsory Courses

✓	English Language Arts 20F	E20F
✓	Physical Education 20F	PEH20F
✓	Enjeux gêographie du 21E siècle 20F	G20FFI
✓	Sciences de la nature 20F	S20FFI
✓	Français 20F	FR20FFI

Choose a Mathematics course	
Mathématiques au quoditien 20S	M20SEFI
Intro aux mathé appl. et précal 20S	M20SIFI

* 2 option courses will be scheduled

ENGLISH AS AN ADDITIONAL LANGUAGE

Courses to be assessed by EAL Program at Miles Macdonell Collegiate

OPTION COURSES

Three (3) for English Program. Two (2) for French Immersion Program.

	Career Connect: Life/Work Planning 20S	LWP20S		Food & Nutrition 20S	HEC20SFN
	Computer Science 20S	CS20S		French: Communication and Culture 20F	F20F
	Computer Science 30S	CS30S		Graphic Communication Technology 20G	TE20GGRC
	Concert Band 20S	MUCB20S		Guitar 20S	MUG20S
	Concert Choir 20S	MUCC20S		History: American 20G	H20G
	Dance 20S	DAN1A20S		Jazz Band 20S	MUJB20S
	Drafting Design Technology 20G	TE20GDRA		Music Production 20S	MUMP20S
	Drama 20S	DR20S		Spanish 20G	SP20G
	Entrepreneurship 20S	C20SE		Visual Arts 20S	VART20S
	Études de la famille 20S	HEC20SFSFI		Arts Visuels 20S	VART20SFI
	Family Studies 20S	HEC20SFS			

sTeam - ENGLISH - Compulsory Courses

Please complete the registration requirements for your chosen program, either the English or French Immmersion Program.
Students interested in the sTeam/sTiam program must submit an Expression of Interest application for consideration.
Upon acceptance, the following courses will be compulsory.

✓	English Language Arts 20F	E20F
✓	Physical Education 20F	PEH20F
✓	Geography 20F	G20F
✓	Science 20F	S20F
✓	Visual Arts 20S	VART20S

Choose a Mathematics course	
Essential Mathematics 20S	M20SE
Intro to Applied and Pre-Cal 20S	M20SI

* 3 option courses will be scheduled

sTiam - FRENCH IMMERSION - Compulsory Courses

✓	English Language Arts 20F	E20F
✓	Physical Education 20F	PEH20F
✓	Enjeux gêographie du 21E siècle 20F	G20FFI
✓	Sciences de la nature 20F	S20FFI
✓	Arts Visuels 20S	VART20SFI

Choose a Mathematics course	
Mathématiques au quoditiens 20S	M20SEFI
Intro aux mathé appl. et précal 20S	M20SIFI
✓ Français 20F	FR20FFI

* 2 option courses will be scheduled

Date: _____ Parent/Guardian: _____

Refer to the course handbook (www.retsd.mb.ca/miles) as you make course selections.

IF APPLICABLE (Other grade level courses)

Grade 9 Compulsory Courses

	English Language Arts 10F	E10F		Le Canada dans le monde contemporain 10F	SSMC10FFI
	Mathematics 10F	M10F		Science 10F	S10F
	Transitional Mathematics 10F	M10FT		Sciences de la nature 10F	S10FFI
	Mathématiques 10F	M10FFI		Français 10F	FR10FFI
	Mathematiques de transition 10F	M10FTFI		Physical Education/Health Education 10F	PEH10F
	Canada in the Contemporary World 10F	CCW10F		Éd. Physique / Éd. a la Santé 10F	PEH10FFI

Grade 9 Option Courses

	Arts visuels 10S (Visual Arts)	VART10SFI		Food & Nutrition 10S	HEC10SFN
	Business Innovations 10S	C10SBI		French: Communication and Culture 10F	F10F
	Computer Science 20S	CS20S		Graphic Communication Technology 10G	TE10GGRC
	Concert Band 10S	MUCB10S		Guitar 10S	MUG10S
	Concert Choir 10S ****	MUCC10S		Jazz Band 10S ****	MUJB10S
	Dance 10S	DAN1A10S		Spanish 10G	SP10G4YR
	Drafting Design Technology 10G	TE10GDRA		Tech. Communications Graphiques 10G (Graphics)	TE10GGRCFI
	Drama 10S	DR10S		Technologie du dessin industriel 10G (Drafting Design)	TE10GDRAFI
	Family Studies 10S	HEC10SFS		Visual Art 10S	VART10S

Collège Miles Macdonell Collegiate

757 Roch St. | Winnipeg, MB R2K 2R1 | Tel: 204.667.1103 | Fax: 204.654.3803
Principal: John Muller | Vice-Principal: Kerry Bartlett | Vice-Principal: Deanna Michaleski |
Acting Vice-Principal: Melissa Vince | Email: miles@retsd.mb.ca | Web: www.retsd.mb.ca/miles

PARENTAL INFORMED CONSENT FOR OUT OF SCHOOL ACTIVITIES IN THE LOCAL COMMUNITY
2026-2027

Dear Parent/Guardian,

The purpose of this letter is to inform you about some of the out-of-school activities or events in the local school community in which your child will participate during this year. Your signature at the bottom of this form confirms that you are aware of the information provided in this letter.

The River East Transcona School Division and the staff of Collège Miles Macdonell Collegiate recognize that valuable and unique learning can take place outside of the school building. We are therefore encouraged to make use of the resources of the local community to meet curriculum goals.

During the school year, student groups will engage in activities within the local community that take them out of the school building. These activities may include but are not limited to activities, events and/or field trips such as: the YMCA-YWCA, bowling alleys, elementary schools, etc.

The risk of injury exists in all student activity. However, due to the very nature of some activities, the risk of injury may increase. The safety and well-being of students is a prime concern, and every effort is made to minimize the foreseeable risks inherent in any activity.

While participating in school activities, which take them into the community, it is expected that students will conduct themselves appropriately during all aspects of schooling.

If, for some reason, your child will not be participating in activities of this nature, please let us know.

I / We understand and agree that this is a part of the school program. I/We also understand that as a result of participating in this program that the participant is expected to follow the school procedures and code of conduct and that any deviations from these may result in consequences from the school administration.

I / We declare having read and understood the above INFORMED CONSENT AGREEMENT in its entirety and hereby consent to participate being aware of all the foregoing.

Parental Informed Consent: Before your child may participate in any local community activities, this signed consent form must be received at the school.

Student's Name (Please Print): _____

_____ _____
Parent/Guardian Signature Date

River East Transcona
SCHOOL DIVISION
creating student success

sTeam EXPRESSION OF INTEREST

River East Transcona SCHOOL DIVISION

What is sTeam?

Science (s) and technology (T) interpreted through engineering (e) and the arts (a), all based in mathematical (m) elements, providing a lens to look at the world around us in meaningful, connected ways. sTeam is designed to provide innovative programming that will:

- Focus on community building, self-awareness, and resiliency
- Provide opportunities for high-potential careers with multiple paths
- Provide opportunities for a wide range of students through skill-building
- Increase awareness/skills regarding career pathways
- Partner with industry, post-secondary institutions, and government
- Be project-based, inquiry-driven, and sTeam-focused
- Build in purposeful mentorship opportunities with related industries

Why sTeam?

sTeam provides students an opportunity, through project-based inquiry, to fulfil the Grade 10 credit requirements of ELA, Science, and Visual Arts. Students are the driving factor in their learning, choosing the topics and issues that connect with them. The sTeam teachers facilitate their learning by helping them connect to the curriculum and the community, organize their thoughts, and clarify the design process. Throughout the learning, students will develop skills in collaboration, critical thinking, creativity, communication, character, and citizenship.

What type of student would enjoy sTeam?

Learners who appreciate hands-on, interdisciplinary curriculum experiences combined with flexible pacing that allows time to explore and learn through a variety of digital platforms. sTeam learners will connect to the community in powerful, unique ways that will inspire a pursuit of deeper knowledge. Students who flourish in sTeam will:

- Enjoy exploring learning through science, technology, engineering, arts, and math
- Have a keen interest in wanting to understand how things work and like to build, create, or design things
- Enjoy learning through inquiry, experimentation, and reflection
- See the importance in being self-motivated and like to learn independently, as well as in collaborative groups
- Demonstrate a commitment to learning and exploring new ideas
- Enjoy co-operating with peers for group projects and collaborative learning explorations
- Thrive in challenging and creative academic environments
- Contribute to a positive and respectful classroom and school community
- Be open and interested in sharing and celebrating learning
- Benefit from connections with industry partners in exploring career pathway options

We ask that if you have an interest in having your child be considered for sTeam, please provide the requested information on the final page of this package. This group will be scheduled together as a class for a full morning or afternoon of one semester. Interest or experience with the computer sciences would be an asset. Consideration will be given to ensure that access to sTeam represents the diversity that makes up our school community.

Completed sTeam submissions (see next page) should be submitted with the registration package. Should you have any questions for clarification, please be sure to contact the school office.

sTeam EXPRESSION OF INTEREST

The attached expression of interest is to be completed by students who are interested in registering for sTeam.

Student name:	Address:	
Home phone:	Cell:	Email:

As you work to highlight some of your thinking and experiences, below, you are invited to create a submission using a method that you feel best supports your interest (e.g., video, reflective art piece, written response).

Learning profile: Describe what excites you about learning and how you would embrace the challenges and opportunities of being part of sTeam.

_____

_____

_____

_____

Skills/interests: What are you passionate about? Highlight skills or interests based on things you have experienced at school, while volunteering, or through work experiences, hobbies, and extracurricular activities.

_____

_____

_____

_____

For parents: Why are you in support of this application?

_____

_____

_____

_____ Student signature	_____ Date
_____ Parent/guardian signature	_____ Date

TECHNICAL VOCATIONAL INTENSIVE PROGRAMS EXPRESSION OF INTEREST

River East Transcona SCHOOL DIVISION

What are technical vocational intensive programs?

Students who are currently in Grade 10 are invited to apply for a position in one of the technical vocational intensive programs. These programs run for two years (Grades 11 and 12) and involve students attending either Kildonan-East Collegiate or Murdoch MacKay Collegiate for one semester in each of the two years. Each semester, students will take four technical vocational courses in order to complete their technical vocational diploma.

The technical vocational intensive programs allow students from across River East Transcona access to technical vocational education starting at the Grade 11 level. Students remain connected to their community school while having access to specialized training and equipment that's only available at the two technical vocational schools in RETSD. Kildonan-East and Murdoch MacKay will work with the student's home school to ensure that courses required for graduation can be completed. Students will graduate from their home school pending the completion of provincial graduation requirements. Placement at one of the schools will be based on space and scheduling considerations.

Why technical vocational education?

Skilled trade and technology careers are important to the well-being of our communities and are an excellent career path for many young people. Embarking on a career in the skilled trades is great for individuals who like to think creatively, solve problems, and work actively within a hands-on environment.

Students interested in a technical vocational intensive program should be:

- Interested in considering a career in the trades
- Self-motivated
- Able to maintain focus on a single subject/topic for longer blocks of time
- Able to arrange for transportation to the designated technical vocational school

TECHNICAL VOCATIONAL INTENSIVE PROGRAMS EXPRESSION OF INTEREST

The attached expression of interest is to be completed by students who are interested in registering for the technical vocational intensive program. In River East Transcona School Division, this program is offered at both Kildonan-East and Murdoch MacKay.

Student name:	
Address:	
Home phone:	Cell:
Email:	Current school:
Program you're interested in (indicate up to two):	
Why are you interested in this program? _____ _____	
Describe who you are as a learner and how this fits with the program. _____ _____ _____	
What are you excited about? Highlight skills or interests based on things you've experienced at school, while volunteering, or through work experience, hobbies, and extracurricular activities. _____ _____ _____	
For parents: Why are you in support of this application? _____ _____ _____	
_____ Student signature	_____ Date
_____ Parent/guardian signature	_____ Date

Application should be returned to home school.

HOME SCHOOL OFFICE USE:

☐ I have reviewed the application and am in support. All credits can be completed prior to graduation.

Name of counsellor: _____