EAL NEWCOMER PRE-REGISTRATION

River East Transcona SCHOOL DIVISION

This form may be completed with the assistance of school staff or families/advocates can complete it on their own. If you need assistance in determining your child's school, our newcomer reception facilitator can provide this. Once completed, the form should be sent to the newcomer reception facilitator at newcomers@retsd.mb.ca.

TO BE COMPLETED BY SCHOOL:

School:		**Date:**	
Contact Person:		**Phone:**	
Transition Meeting:	☐ Had ☐ Scheduled ☐ N/A		

STUDENT INFORMATION (please fill in one form for each student and print clearly):

Student Name:	**First:** Click here to enter text.	**Last:** Click here to enter text.	
Legal Gender:	☐ Male ☐ Female ☐ Other: Click here to enter text.		
Birth Date:	Click or tap to enter a date.	**Age:**	Click here to enter text.
Country of Birth:	Click or tap here to enter text.		
Date of Arrival in Canada:	Click to enter a date.	**Previous Country:**	Click here to enter text.
Current Address:	Click here to enter text.		
Languages Spoken at Home:	Click here to enter text.		
Previous Clinical Supports (if any):	☐ Physiotherapy ☐ Speech and language ☐ Occupational therapy ☐ Psychology ☐ Other: Click here to enter text.		

PARENT/GUARDIAN INFORMATION

Mother/Guardian:	**First:** Click here to enter text.	**Last:** Click here to enter text.	
Father/Guardian:	**First:** Click here to enter text.	**Last:** Click here to enter text.	
Phone Number(s):	1. Click here to enter text.	2. Click here to enter text.	
Email:	1. Click here to enter text.	2. Click here to enter text.	
Parental Status in Canada:	☐ Canadian ☐ Permanent Resident ☐ Other: Click here to enter text.	☐ Work/Study Permit – Expiry Date: Click to enter a date.	

CONTACT INFORMATION

If you have a sponsor family member, or settlement counsellor who helps you arrange meetings, add their information here:

Name:	Click here to enter text.	**Phone:**	Click here to enter text.
Relationship to Family:	Click here to enter text.		

OFFICE USE ONLY

Date of contact:		**Meeting date:**	
Interpreter used:	☐ Family ☐ RETSD	**Name:**	
Status:	☐ Canadian ☐ P.R. ☐ Study Permit ☐ Work Permit ☐ RPC		
Code level:	☐ 10 ☐ 20 ☐ 30 ☐ 40 ☐ 50	☐ SS	
Stages:	L _____ S _____ R _____ W _____ Average Stage:	☐ EAL program	☐ EAL program declined