

Thank you for your interest in attending Fusion Collegiate. We are currently accepting new student applications for the 2025-26 school year.

Please complete the application form and email to [admin@fusioncollegiate.ca](mailto:admin@fusioncollegiate.ca)

If you have any questions, please email [admin@fusioncollegiate.ca](mailto:admin@fusioncollegiate.ca) or call us at 587-333-7772

## Apply to Fusion Collegiate

**Step 1:** The Parent/Guardian or Independent student completes the application and emails a signed copy to [admin@fusioncollegiate.ca](mailto:admin@fusioncollegiate.ca) (*digital signatures are accepted*). Please ensure all information is complete.

**Step 2:** Please attach a copy of your (your student's) last report card or student transcript, IPP if applicable and Canadian Birth Certificate or alternate (*see page 11 for alternative documentation*).

**Step 3:** We will send successful applicants a Letter of Admission.

*(In the event we receive more registrations than spots available, we will conduct a lottery process. There is no priority on the waitlist. All names are equally entered into each lottery draw).*

**Step 4:** The principal or designate of Fusion Collegiate will contact you to discuss your (your student's) learning plan.

Independent Student: means a student who is

- a) 18 years of age or older, or
- b) 16 years of age or older and
  - i. living independently as determined by a board in accordance with section 6 of the Education Act, or
  - ii. is party to an agreement under section 57.2 of the Child, Youth and Family Enhancement Act.

## Pathway or Program Interest

**Which Gap year program are you most interested in:**

- Skilled Trades Accelerator     Post-secondary Accelerator

**What program area are you most interested in (you may select more than one option):**

- Animal Health     Business & Entrepreneurship     Skilled Trades     Discovery & Exploration

- Health Sciences     Aviation    Other \_\_\_\_\_



## Student Medical Information

If the student's attendance at school may be affected by an existing medical or physical condition, we will meet with you to develop a student health plan.

Does the student have any medical or physical conditions that may affect their attendance at school?  Yes  No

Does the student have any life-threatening allergies?  Yes  No

If **yes** to either of the above questions, give a brief description:

## Aboriginal Self-Identification (optional)

If you wish to declare the student as Aboriginal, please select one:

First Nation (status)  First Nation (non-status)  Métis  Inuit

For further information, refer to <https://www.alberta.ca/first-nations-metis-or-inuit-student-self-identification.aspx> or contact Alberta Education at 780-427-8501 (dial 310-0000 first to be connected toll-free from anywhere in Alberta).

If you have questions regarding the collection of student information by the school board, please contact the School Board superintendent at [admin@fusioncollegiate.ca](mailto:admin@fusioncollegiate.ca)

## Student Learning Needs

Has the student *ever* had an Individual Program Plan (IPP), Individual Education Plan (IEP) or a learning, medical or mental health assessment that has provided recommendations to support the student's learning?  Yes  No

If **yes**, provide the school with the learning, medical or mental health assessment document (e.g., psycho-educational assessment, physician letter).

If **yes** and from **inside Alberta**, provide a description and if known, the Alberta Education special education code(s).

If **yes** and from **outside Alberta**, provide a description and if known, the special education code(s).

Has the student *ever* been in a special education program/class or unique setting elsewhere?  Yes  No

If **yes**, provide the name of the program/class or setting, please provide a description.

Are there any language needs or other unique learning needs we should know to support the student's learning?

**Previous School Information**

Has the student attended school elsewhere?  Yes  No

If **yes**, provide:

Name of the Last School Attended: \_\_\_\_\_

Name of School Contact: \_\_\_\_\_

Grade Completed: \_\_\_\_\_ Withdrawal or Completion Date: \_\_\_\_\_  
MM/DD/YYYY

Reason For Leaving: \_\_\_\_\_

### Legal Guardians/Parents /Others

If there is more than one Legal Guardian, include the information for *each* guardian on this form whether the guardians live together or not. A legal guardian may be a parent or other person who is legally responsible for the well-being of the child and makes important decisions for the child. Legal guardian is defined in section 1(1)(2) of the *Education Act*. For more information, refer to the **Relationship and Custody and Guardianship Documents** described below.

Set the phone preferences using the 'Call Order'. Select 1 for the preferred phone number. **Please provide a minimum of TWO emergency contacts.** They may be legal guardians, non-legal guardians or a combination of both.

### Relationship

The following are the options for relationships:

<ul style="list-style-type: none"> <li>▪ Advocate</li> <li>▪ Agency Representative</li> <li>▪ Babysitter</li> <li>▪ Cousin</li> <li>▪ Custodian</li> <li>▪ Family Friend</li> <li>▪ Father</li> <li>▪ Foster Parent</li> </ul>	<ul style="list-style-type: none"> <li>▪ Grandparent</li> <li>▪ Group Home Case Worker</li> <li>▪ Home Stay Parent Interpreter</li> <li>▪ Legal Guardian</li> <li>▪ Mother</li> <li>▪ Other</li> <li>▪ Outside School Care</li> <li>▪ Parent</li> </ul>	<ul style="list-style-type: none"> <li>▪ Partner</li> <li>▪ Physician</li> <li>▪ Probation Officer</li> <li>▪ Psychologist</li> <li>▪ Relative</li> <li>▪ Sibling</li> <li>▪ Social Worker</li> </ul>	<ul style="list-style-type: none"> <li>▪ Sponsor</li> <li>▪ Spouse</li> <li>▪ Stepfather</li> <li>▪ Stepmother</li> <li>▪ Stepparent</li> <li>▪ Stepsibling</li> <li>▪ Unspecified</li> </ul>
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### Guardianship and Custody

The original court document must be provided to the school. The school will make a copy of the document, which will be placed in the Official Student Record (OSR).

- **Decision Making:** legal authority for making day-to-day decisions affecting the child. Like joint custody, can be court ordered. If not addressed in an Order, the guardians usually both have rights and responsibilities for this.
- **Delegation of Powers and Duties to a Child Caregiver:** implicit sub-allocation of powers and duties by the Director of Child and Family Services, or their delegate (i.e., the social worker), under the *Child, Youth and Family Enhancement Act*. Done by the social worker for a child in protective custody – either Temporary Guardianship Order (TGO) or Permanent Guardianship Order (PGO).
- **Joint / Shared Custody / Parenting:** more than one guardian may exercise the powers, responsibilities, and entitlements of guardianship, unless the court orders otherwise; shall use best efforts to co-operate with one another in exercising their powers, responsibilities and entitlements of guardianship. Can be court ordered, or presumed if the parents were married and are now separated but have not been to court.
- **Sole Custody / Parenting:** allocation, generally or specifically, of the powers, responsibilities, and entitlements of guardianship exclusive to one individual. Usually, court ordered.

Please complete one section for each legal guardian.

## Legal Guardian *(Complete this section for Dependent Students Only)*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Lives with Student:  Yes  No Same Address as Student:  Yes  No Emergency Contact:  Yes  No

Contact Order (assign a priority level):  1<sup>st</sup>  2<sup>nd</sup>  3<sup>rd</sup>

Legal Guardians / Parents Live Together:  Yes  No If **yes**, skip to Home Phone:

Custody:  Sole Custody / Parenting  Joint / Shared Custody / Parenting  Delegation of Authority

Decision Making

Court Order:  Yes  No If **yes**, a copy must be provided for the student record.

Emergency Protection Order:  Yes  No If **yes**, a copy must be provided for the student record.

If there are **no** court documents, a brief written summary of the current family status is required:

Home Phone: \_\_\_\_\_

Call order:  1  2  3

Work Phone: \_\_\_\_\_ Ext. \_\_\_\_\_

Call order:  1  2  3

Cell Phone: \_\_\_\_\_

Call order:  1  2  3

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

Home Address: Apt/ Suite # \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

## Legal Guardian *(Complete this section for Dependent Students Only)*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Lives with Student:  Yes  No Same Address as Student:  Yes  No Emergency Contact:  Yes  No

Contact Order (assign a priority level):  1<sup>st</sup>  2<sup>nd</sup>  3<sup>rd</sup>

Legal Guardians / Parents Live Together:  Yes  No If **yes**, skip to Home Phone:

Custody:  Sole Custody / Parenting  Joint / Shared Custody / Parenting  Delegation of Authority  
 Decision Making

Court Order:  Yes  No If **yes**, a copy must be provided for the student record.

Emergency Protection Order:  Yes  No If **yes**, a copy must be provided for the student record.

If there are **no** court documents, a brief written summary of the current family status is required:

Home Phone: \_\_\_\_\_

Call order: 1 2 3

Work Phone: \_\_\_\_\_ Ext. \_\_\_\_\_

Call order: 1 2 3

Cell Phone: \_\_\_\_\_

Call order: 1 2 3

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

Home Address: Apt/ Suite # \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

## Legal Guardian *(Complete this section for Dependent Students Only)*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Lives with Student:  Yes  No Same Address as Student:  Yes  No Emergency Contact:  Yes  No

Contact Order (assign a priority level):  1<sup>st</sup>  2<sup>nd</sup>  3<sup>rd</sup>

Legal Guardians / Parents Live Together:  Yes  No If **yes**, skip to Home Phone:

Custody:  Sole Custody / Parenting  Joint / Shared Custody / Parenting  Delegation of Authority

Decision Making

Court Order:  Yes  No If **yes**, a copy must be provided for the student record.

Emergency Protection Order:  Yes  No If **yes**, a copy must be provided for the student record.

If there are **no** court documents, a brief written summary of the current family status is required:

Home Phone: \_\_\_\_\_

Call order: 1 2 3

Work Phone: \_\_\_\_\_ Ext. \_\_\_\_\_

Call order: 1 2 3

Cell Phone: \_\_\_\_\_

Call order: 1 2 3

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

Home Address: Apt/ Suite # \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Please provide a minimum of TWO emergency contacts (other than parent/guardians listed above)

## Emergency Contact 1 – NOT a Legal Guardian (e.g. stepparent, interpreter)

*(Complete for Independent and Dependent Students)*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Lives with Student:  Yes  No Same Address as Student:  Yes  No

Contact Order (assign a priority level):  1<sup>st</sup>  2<sup>nd</sup>  3<sup>rd</sup>

If student is dependent - Permission to Pick Up Student from School (if emergency contact, "Yes" must be checked):  Yes  No

Home Phone: \_\_\_\_\_ Call order: 1 2 3

Work Phone: \_\_\_\_\_ Ext. \_\_\_\_\_ Call order: 1 2 3

Cell Phone: \_\_\_\_\_ Call order: 1 2 3

## Emergency Contact 2 – NOT a Legal Guardian (e.g. stepparent, interpreter)

*(Complete for Independent and Dependent Students)*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Lives with Student:  Yes  No Same Address as Student:  Yes  No

Contact Order (assign a priority level):  1<sup>st</sup>  2<sup>nd</sup>  3<sup>rd</sup>

If student is dependent - Permission to Pick Up Student from School (if emergency contact, "Yes" must be checked):  Yes  No

Home Phone: \_\_\_\_\_ Call order: 1 2 3

Work Phone: \_\_\_\_\_ Ext. \_\_\_\_\_ Call order: 1 2 3

Cell Phone: \_\_\_\_\_ Call order: 1 2 3



## Emergency Contact 3 – NOT a Legal Guardian (e.g. stepparent, interpreter)

*(Complete for Independent and Dependent Students)*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Lives with Student:  Yes  No Same Address as Student:  Yes  No

Contact Order (assign a priority level):  1<sup>st</sup>  2<sup>nd</sup>  3<sup>rd</sup>

If student is dependent - Permission to Pick Up Student from School (if emergency contact, "Yes" must be checked):  Yes  No

Home Phone: \_\_\_\_\_

Call order: 1 2 3

Work Phone: \_\_\_\_\_ Ext. \_\_\_\_\_

Call order: 1 2 3

Cell Phone: \_\_\_\_\_

Call order: 1 2 3

## Declaration *(Complete if student is a Dependent Student)*

I, the undersigned, hereby represent that I have the legal authority to register the student identified on this form. I have identified all legal guardians / parents for the student. I declare the information that I have provided on this form is complete and accurate.

**I will immediately notify the school of any changes to the information on this form.**

You may be asked to provide documentation confirming guardianship.

Signature Legal Guardian/Parent: \_\_\_\_\_

Print Legal Guardian/Parent Name: \_\_\_\_\_

Date (MM/DD/YYYY): \_\_\_\_\_

## Declaration *(Complete by Independent Student)*

I, the undersigned, hereby represent that I have the legal authority to register myself. I declare the information that I have provided on this form is complete and accurate.

**I will immediately notify the school of any changes to the information on this form.**

Signature Independent Student: \_\_\_\_\_

Print Independent Student Name: \_\_\_\_\_

Date (MM/DD/YYYY): \_\_\_\_\_

## Application Checklist

- Application Form complete and signed
- Canadian Birth Certificate or alternate document
- Grade 11, 12 or Mind the Gap attach a Detailed Academic Report (DAR)/transcript.)
- If entering G10 copy of your student's latest Grade 9 report card
- IPP copy (if applicable)

### Freedom of Information and Protection of Privacy

The personal information requested on this form is collected under the authority of Alberta's *Freedom of Information and Protection of Privacy (FOIP) Act*, the *Education Act* and its regulations, and the *Canadian Charter of Rights and Freedoms*, Section 23. This information will be used for the maintenance of the student's record, for a school board's obligation to provide students with an education program that meets their needs, to provide a safe and secure school environment and other purposes that relate directly to and are necessary for an operating program or activity, including program placement, determination of eligibility and/or suitability for provincial or federal funding, contact and health related information in the event of problems or emergencies. Personal information may also be provided to the Minister of Education for the purpose of carrying out programs, activities, or policies under their administration (e.g., research, statistical analysis).

This information will be treated in accordance with the privacy protection provisions of the *FOIP Act*.

If you have any questions about this form, please contact Fusion Collegiate [admin@fusioncollegiate.ca](mailto:admin@fusioncollegiate.ca)

## Proof of Age, Legal Name and Citizenship

The following documents are requested, please scan and attach as a pdf document.

The legal guardian/parent or independent student must produce the student's Canadian birth certificate at the time of registration. If a Canadian birth certificate is not available, the school may accept a:

- Canadian passport;
- Canadian Citizenship Certificate or Card;
- Canadian Certificate of Indian Status Card; or
- Canadian court order that states the legal name and age or date of birth of the child (e.g. Alberta adoption order). However, this document will not be accepted as proof of citizenship and further documentation will be needed.
- Canadian federal government Record of Landing; or
- Canadian federal government Permanent Resident Card
- Permanent Resident Record or Confirmation of Permanent Residence.

We are **not** able to accept:

- document from another country;

Please contact the Fusion Collegiate [admin@fusioncollegiate.ca](mailto:admin@fusioncollegiate.ca) if you as a legal guardian/parent or independent student are not able to show proof of you (your student's) Canadian citizenship.

### *Exception – Students in Shelters*

If the legal guardian/parent does not have one of the documents listed above, they will provide a written summary of current family status until documentation can be provided. The legal guardian/parent is to apply to the government to acquire the required document. Shelter staff can help with this. If applicable, the legal guardian/parent will provide the Restraining Order (RO) or Emergency Protection Order (EPO).

Anything outside of the listed documents would need to be discussed with the principal at Fusion Collegiate.