



REQUEST FOR STUDENT ATTENDANCE RECORDS

Please fill in the following information, include a copy of proof of identity (any identification that shows name and birth date is adequate) and submit this information, along with the \$20 fee in cash or money order to:

SASKATCHEWAN RIVERS SCHOOL DIVISION
545 11TH STREET EAST
PRINCE ALBERT SK S6V 1B1
PHONE: 1-888-764-1571
FAX: (306) 763-4460

Applicant Information

Last Name	First Name	Middle Name	
Address	City or Town	Province	
Postal Code	Telephone (<i>Residence</i>)	Telephone (<i>Work</i>)	Facsimile

STUDENT NAME First, Middle, Last (maiden/other name if applicable)	DATE OF BIRTH	SCHOOL ATTENDED	GRADE	YEAR

 Signature of Applicant