

Office Use Only

School Division Student Number: _____

Ministry of Education Student Number: _____

Student Registration Form – _____

Home-based Education

STUDENT PERSONAL INFORMATION

Student's Legal Name: _____
Surname First Name Middle Name(s)

Usual First Name: _____ Date of Birth: ____/____/____ Gender: Male Grade: _____
Month Day Year Female

Mailing Address: _____

City: _____ Postal Code: _____ Telephone: _____

Land Location (For Rural Students): Quarter _____ Section _____ Township _____ Range _____ Meridian _____

Family Email Address: _____

PARENT OR GUARDIAN INFORMATION

Relationship: Father, Mother Guardian
Step-father Step-mother

Name: _____
Surname First Name

Does this student live with you? Yes No

Employer: _____

Employer's Telephone: _____

Cell Phone Number: _____

PARENT OR GUARDIAN INFORMATION

Relationship: Father, Mother Guardian
Step-father Step-mother

Name: _____
Surname First Name

Does this student live with you? Yes No

Employer: _____

Employer's Telephone: _____

Cell Phone Number: _____

CITIZENSHIP INFORMATION

Canadian Other—please specify: _____ Country of Birth: _____

LANGUAGE INFORMATION: (language spoken in the home)

First Language _____ Second Language _____

FIRST NATIONS, INUIT AND MÉTIS (voluntary self-declaration)

First Nations Status First Nations Non-Status Inuit Métis

Do you live on a reserve? Yes No

Reserve Name: _____

LAST SCHOOL ATTENDED (Please complete if the student is new to home schooling)

Name of School: _____ Grade: _____

Address of School: _____ Telephone: _____
(City or Town)

SIGNATURE REQUIRED

I hereby declare that I have read and understood the information contained on this Student Registration Form and that the information I have provided is correct. I understand it is my responsibility to inform the school of any changes to the information contained on this form.

Date: _____

Signature of Parent or Guardian: _____