Saskatchewan Rivers

PARENT/GUARDIAN CONSENT FOR USE OF STUDENT'S PREFERRED FIRST NAME AND PRONOUNS

Excellence for Every Learner	
I (We), the undersigned, consentthat	
(Student's Legal Name)	
be referred to by the following name(s):	
{Student's Preferred Name(s)}	
AND/OR	
be referred to by the following pronoun(s):	
{Student's Preferred Pronoun(s)}	
and authorize that the above change(s) be reflected on the student's official record.	
Signature of student (if 16 years of age or older):	
(Student Signature) (Date)	
Signature of parent(s)/guardian(s) (if student is younger than 16 years of age):	
Parent/Guardian Signature) (Date)	
Parent/Guardian Signature) (Date)	

Saskatchewan Rivers Public School Division Administrative Procedures Manual