

Student Registration Form -2025-2026

Home-based Education

Date:_____

Student's Legal Name: Surname Usual First Name: Mailing Address: City: Postal Code:	First Name /// onth Day Year		Name(s)
Mailing Address:	onth Day Year	Gender: Male	
Mailing Address:	•		Unspecified
City: Postal Code:		Femal	e Grade:
-	:	Telephone:	
Land Location (For Rural Students): Quarter Section	on Township	Range	Meridian
Family Email Address:			
PARENT OR GUARDIAN INFORMATION	PARENT OR GUARI	NIAN INFORMATIO	ON.
Relationship: Father, Mother Guardian		, Mother	Guardia
Step-father Step-mother		ather Step-moth	
		•	
Name: Surname First Name	Name:Surnai	ne	First Name
Does this student live with you? Yes No	Does this student live v	vith you? Yes	No
Employer:	Employer:		
Employer's Telephone:	Employer's Telephone		
Cell Phone Number:	Cell Phone Number: _		
CITIZENSHIP INFORMATION			
Canadian Other—please specify:	Country of	Birth:	
LANGUAGE INFORMATION: (language spoken in the home	e)		
First Language	Second Language		
FIRST NATIONS, INUIT AND MÉTIS (voluntary self-declara First Nations Status First Nations Non-St		Métis	
Do you live on a reserve? Yes No	atus muit	Metis	
Reserve Name:	_		
LAST SCHOOL ATTENDED (Please complete if the student is new to	home schooling)		
Name of School:	Grade:		
Address of School: (City or Town)		Telephone:	

Signature of Parent or Guardian: