



# PowerSchool Registration: Home-Based Education

## STUDENT INFORMATION

Name: \_\_\_\_\_

(Last) (First) (Middle)

Gender: Male Female Non-Gender Specific

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

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

(P.O Number/Street) (City/Town) (Province) (Postal Code)

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

Last School Attended: \_\_\_\_\_

(Name of School) (City) (Province) (Postal Code)

Name(s) of sibling(s) registered in Home-Based Learning: \_\_\_\_\_

## BACKGROUND INFORMATION

First Nations/Registered/Treaty/Status First Nations/Non-Registered/Non-Status

Affiliated First Nation: \_\_\_\_\_

Status Number: \_\_\_\_\_

First language spoken at home: \_\_\_\_\_ Second language spoken at home: \_\_\_\_\_

Country of Birth: \_\_\_\_\_

## PARENT/GUARDIAN CONTACT INFORMATION

### Contact 1:

Name: \_\_\_\_\_ Relation to Student: \_\_\_\_\_

Address: Same  or \_\_\_\_\_ E-mail: \_\_\_\_\_

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

### Contact 2:

Name: \_\_\_\_\_ Relation to Student: \_\_\_\_\_

Address: Same  or \_\_\_\_\_ E-mail: \_\_\_\_\_

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

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## FOR OFFICE USE ONLY:

SDS #: \_\_\_\_\_

Canadian Birth Certificate or  Canadian Citizenship Document #: \_\_\_\_\_

Submit: