

North Eastern Catholic District School Board

DECLARATION OF GUARDIANSHIP

This form is to be used in the event that a student will be residing in a community within the NCDSB jurisdiction in the care of someone other than the student's parents while attending NCDSB school

STUDENT INFORMATION

Student's Name:	Grade:	Date of Birth:
School:	Gender: <input type="checkbox"/> M <input type="checkbox"/> F	Citizenship:

PARENT INFORMATION

	Home Phone:
	Cell Phone:
Email Address:	Citizenship:

GUARDIAN INFORMATION

Guardian's Name(s):	Current Address:
Home Phone:	Email Address:
Cell Phone:	

Relationship to Student:

*Note: If the guardian is not a member of the student's immediate family, this form must be witnessed by a Notary Public and sealed with the Official Seal of the Notary Public.

DECLARATION OF GUARDIANSHIP

I, _____ name of custodial parent, solemnly declare that I am the parent or legal guardian of the above-named student. While the student is in _____ (name of town/city), she/he will be under the care of the above-named Guardian. I have granted my authorization and adequate arrangements have been made for the guardian to act in place of me in times of emergency, such as when medical attention or intervention is required, but also for day care and superdrfy