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## Other Pupil Admission Form

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Requested School Admission:  
Admission Request Date

accepts full financial responsibility for tuition fees,  
transportation and additional special needs expenses as indicated below for the school year **20**

Student Name:	DOB:	Grade:
Student Band Name:		Band Number:
Permanent Resident Address:		
Parent/Guardian Name:		Telephone Number:
Parent/Guardian Email Address:		Emergency Number:
Last School/Grade Attended:		

This student has a formally identified exceptionality      YES                      NO  
(If YES, complete the following)  
Identified exceptionality (ies):

Any current support services in place (Check Applicable)

Access to: Special Education Resources         
                  Child & Youth Worker                         
                  Specialized Program                     

**5195 (1) NATIONAL APPROVALS (C) 2014 WR(3(T)-6.URE(O)S( )TJ 0 Tc 0 T16.09.1 0 Td ( )TjT 2 42.6 2.56 193.**

Print Name of Ba

Print Name of Pa

### ADMISSION PENDING BOARD APPROVAL

Print Name of School Principal	Signature	Date
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Print Name of Superintendent of Education	Signature	Date
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