Cabri School Student Information Verification Current Grade:

	rupii No		Current Grac	Je.				
Student			Student e-mail					
Legal Last Name			Primary Phone Cell Phone					
Legal First Name			Street Address					
Legal Middle Name(s)		į	_					
Preferred Last			City		Prov	PC		
Preferred First			Land Location					
Preferred Middle		<u> </u>		QS	========	RL TWSI	:=====::	======
Gender	Date of birth	i	Mailing Address Street Address	s (it aitter	ent than p	roperty a	aaress)	
Family Courier			RR Number/PO E	 Rox				
Health Services No.	Alt. Health No.		~ 1.		Prov	PC		
	, ac realer to.		City		110V			
Previous School Name			_	City				
PARENT / GUARDIAN IN	FORMATION	Phy	sical Address					
Last. First name		! -	et Address					
Relationship								
Emergency Priority	Legal Guardianship	City			Prov	P	2	
Parent/Guardian	Lives with student Receive Grade Mailing	Land	d Location	QS -	SEC RL	TWSP	REG	MER
Emergency Contact	Receive Conduct		::		========	========		======
Primary Phone	— Mailing Receive Other	1 !	ling Address (if d et Address				-	
Cell Phone	— Mailing Receive Email	- 11	_					
	Contact has portal access	City	lumber/PO Box _		Prov			
E-mail Address							<u> </u>	
PARENT / GUARDIAN IN	FORMATION	Phy	sical Address					
Last. First name		Stre	et Address					
Relationship		_						
Emergency Priority	Legal Guardianship Lives with student	City			Prov	PO	C	
Parent/Guardian	Receive Grade Mailing	Land	d Location	QS -	SEC RL	TWSP	REG	MER
Emergency Contact	Receive Conduct		ling Address (if d	=======	========	========	======:	======
Primary Phone	— Mailing Receive Other	11	et Address				-	
	— Mailing Receive Email	- 15	Number/PO Box _					
F mail Address	Contact has portal access	City			Prov			
E-mail Address		_						
PARENT / GUARDIAN IN	FORMATION	Phy	sical Address					
		- Stre	et Address					
Relationship		_						
Emergency Priority	Legal Guardianship	City			Prov	P(
Parent/Guardian	Lives with student Receive Grade Mailing	-	d Location	QS -		TWSP	REG	MER
Emergency Contact	Receive Conduct		ling Addross (if d	=======		========		======
Primary Phone	— Mailing Receive Other	1 !	ling Address (if d et Address	iiierent 1	liiaii Stude	iii / prope	ı ıy add	ır ess)
Cell Phone	— Mailing Receive Email	l i	_					
Work Phone	Contact has portal access	City	Number/PO Box _		Prov		 	
E-mail Address					1100			

Page 2 of 2 February 27, 2024

Cabri School Student Information Verification

Pupil No.: Current Grade:

EMERGENCY CONTACT INFORMATION (contacted if par called)	ents can't be reached, liste	d in the order they are to be		
Emergency Contact 1 Prin	nary Phone	Work Phone		
Cel	Phone	Relationship		
Emergency Contact 2 Prin	nary Phone	Work Phone		
	Phone	Relationship		
Emergency Contact 3 Prin	nary Phone	Work Phone		
		Relationship		
SIBLING INFORMATION				
Legal Last Name	Birthdate			
Legal First Name	Relationship			
Legal Last Name	Birthdate			
Legal First Name	Relationship			
Legal Last Name	Birthdate			
Legal First Name	Relationship			
Legal Last Name	Birthdate			
Legal First Name	Relationship			
Legal Last Name	Birthdate			
Legal First Name	Relationship			
STUDENT MEDICAL ALERTS				
Description				
OTHER STUDENT ALERTS - Health, family or other infor	mational			
Description				
CITIZENSHIP Country	Entry to Canada Date			
CITIZENSHIP Country	-			
CITIZENSHIP Country 2	Citizenship Effective Date _			
Country of Birth	Home Language			
Resident Type	HOME LANGUAGE 2			
Indigenous Declaration Inuit/Inuk Metis	Non-Status-Indian	Status-Indian		
Living on Reserve Reserve of Residence	Band Affiliation			
Parent / Guardian Signature		Date		