

# Herbert School Student Information Verification

Pupil No.:

Current Grade:

**Student**

Legal Last Name \_\_\_\_\_

Legal First Name \_\_\_\_\_

Legal Middle Name(s) \_\_\_\_\_

Preferred Last \_\_\_\_\_

Preferred First \_\_\_\_\_

Preferred Middle \_\_\_\_\_

Gender \_\_\_\_\_

Date of birth \_\_\_\_\_

Family Courier

Student e-mail \_\_\_\_\_

Primary Phone \_\_\_\_\_

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

Street Address \_\_\_\_\_

City \_\_\_\_\_

Prov \_\_\_\_\_

PC \_\_\_\_\_

Land Location \_\_\_\_\_

QS

SEC

RL

TWSP

REG

MER

**Mailing Address (if different than property address)**

Street Address \_\_\_\_\_

RR Number/PO Box \_\_\_\_\_

City \_\_\_\_\_

Prov \_\_\_\_\_

PC \_\_\_\_\_

Previous School Name \_\_\_\_\_

City \_\_\_\_\_

**PARENT / GUARDIAN INFORMATION**

Last. First name \_\_\_\_\_

Relationship \_\_\_\_\_

Emergency Priority \_\_\_\_\_

Legal Guardianship

Parent/Guardian

Lives with student

Emergency Contact

Receive Grade Mailing

Primary Phone \_\_\_\_\_

Receive Conduct

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

Mailing Receive Other

Work Phone \_\_\_\_\_

Mailing Receive Email

E-mail Address \_\_\_\_\_

Contact has portal access

**Property Address (if not living with student)**

Street Address \_\_\_\_\_

City \_\_\_\_\_

Prov \_\_\_\_\_

PC \_\_\_\_\_

Land Location \_\_\_\_\_

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**Herbert School**  
**Student Information Verification**

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Current Grade: \_\_\_\_\_

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**EMERGENCY CONTACT INFORMATION (contacted if parents can't be reached, listed in the order they are to be called)**

Emergency Contact 1 _____	Primary Phone _____	Work Phone _____
	Cell Phone _____	Relationship _____
Emergency Contact 2 _____	Primary Phone _____	Work Phone _____
	Cell Phone _____	Relationship _____
Emergency Contact 3 _____	Primary Phone _____	Work Phone _____
	Cell Phone _____	Relationship _____

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**SIBLING INFORMATION**

Legal Last _____	Birthdate _____	Relationship _____
Legal First _____		
Legal Last _____	Birthdate _____	Relationship _____
Legal First _____		
Legal Last _____	Birthdate _____	Relationship _____
Legal First _____		
Legal Last _____	Birthdate _____	Relationship _____
Legal First _____		
Legal Last _____	Birthdate _____	Relationship _____
Legal First _____		

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**STUDENT MEDICAL ALERTS**

Description \_\_\_\_\_

**OTHER STUDENT ALERTS - Health, family or other informational**

Description \_\_\_\_\_

CITIZENSHIP Country _____	Entry to Canada Date _____
CITIZENSHIP Country 2 _____	Citizenship Effective Date _____
Country of Birth _____	Home Language _____
Resident Type _____	HOME LANGUAGE 2 _____

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**Indigenous Declaration**      Inuit/Inuk       Metis       Non-Status-Indian       Status-Indian

Living on Reserve       Reserve of Residence \_\_\_\_\_      Band Affiliation \_\_\_\_\_

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**Parent / Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_