, (insert PARENT or GUARDIAN name)

(insert LEGAL names of STUDENT)



Date Received by School:

AM the parent or guardian of the STUDENT listed below

١,

Temporary Declaration of Legal Name and Age for Canadian Citizens

(first, middle and last) and do DECLARE that	at he or s	she was born on the date entered below
must enter MM/DD/YYYY →		
AND that his or her legal name is as stated previous AND that I COMMIT to providing PWPSD with the id	•	ion document as marked below:
		• must click to choose only 1 option
This will be provided to the School: (enter name of S	School) –	•
within 30 days of date of registration.		
I AGREE that if the student named is found to be inel school within the Peace Wapiti Public School Division	-	e or she will be withdrawn from attending
	+	insert parent/guardian name as electronic signature
	+	insert date of signature
How to Complete this fillable form: For best re Parent or Guardian will complete all above boxes,	sults, d	lownload and open this form in Adobe Reader. turn completed form to the school named.
Open form using Adobe to fill in all boxes.		
Digital Option: Once complete, click File, Save As to an email to the school. Or click the Print icon a	s, name nd Save	and Save the document to your device, then attach as PDF to your device.
Print Option: Once form is complete, print and dro to the school.	p off to	the school. Click the Print Icon. Attach it to an email
NOTE: This declaration SHOULD be done within identification document MUST be received by the	3 days o	of registering your student; and the actual within 30 days of registration.
For Scho	ool Input	
Alberta Student Number:		
Initial Date Received by School:		
Follow Up Date by School:		