



**School District No. 59 (Peace River South)**  
**School Request Form**  
**Aboriginal Program Participation**



Student Name: \_\_\_\_\_

School: \_\_\_\_\_

As a parent/guardian of the above-named student, I give permission for my child to receive additional support while attending school in School District No. 59 (Peace River South).

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This information is voluntary:  Status Indian  Non status Indian  Metis  Inuit

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The programs could include the following:

- The programs of the Coach/Mentor teachers and / or Aboriginal support staff.
- Literacy intervention, tutorial or academic assistance.
- Attendance monitoring and intervention.
- Grade and Grad Coaching.
- Assistance of the School Family Support Worker.
- School wide or classroom cultural/history awareness opportunities and / or presentations.
- Submission of names to external sources for awards, bursaries and recognition.

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I have identified my child as having Aboriginal ancestry and give informed consent for my child to participate.

I understand this form will follow my child through to graduation, if enrolled in any school in School District No. 59.

I am aware that these over and above services are available to students who self-identify as having Aboriginal ancestry and are funded by the B.C. Ministry of Education, Aboriginal Education. I am also aware, that I can change my declaration for my child(ren) to receive additional service upon my request.

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Parent Name: (please print): \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_