

1 — STUDENT IDENTIFICATION					
Original copy of student's birth certificate is mandatory					
Family name : First name :					
Date of birth : Birth place :					
Medical insurance card number : (Optional) -	Expiration date :				
Last school attended :	Class :				
First language: French 🗆 English 🗆 Langua	age spoken at home : French $\ \square$ English $\ \square$				
Other language :					
Will your child have lunch at school? ☐ Yes ☐ No Will he or she attend school day care? ☐ Yes ☐ No					
Child's respondant or legal guardian: Parent 1 Parent 2 Parents 1 and 2 or Tutor					
2 — RESPONDANT OR LEGAL GUARDIAN'S IDENTIFICATION					
PARENT 1	Education level				
Family name :	First name :				
Date of birth :	Birth place :				
PARENT 2	Education level				
Family name :	First name :				
Date of birth :	Birth place :				
TUTOR					
Family name :	First name :				
Date of birth :	Birth place :				
3 — STUDENT'S ADDRESS					
MAIN ADDRESS FOR ADMISSION (choose one address)					
Parent 1 □ Parent 2 □	Tutor				
PARENT 1					
No : Street :	P.O. Box :				
Municipality :	Province : Québec Postal code :				
Home phone number : Eme	ergency number :				
Work phone number : Em	ail address :				
Needs school bus : Yes No					
School bussing is only assured when the address is within the school boudary's bassin. Only one address par parent/tutor is accepted for school bussing.					
Bussing address if different than that of the parent's address :					
PARENT 2					
No : Street :	P.O. Box :				
Municipality :	Province: Québec Postal code:				
Home phone number : Em	nergency number :				
Work Phone number : Em	ail address:				
Needs school bus : Yes No					
School bussing is only assured when the address is within the school boudary's bassin. Only one address par parent/tutor is accepted for school bussing.					
Bussing address if different than that of the parent's address:					

TU	<u>TOR</u>						
No	:	Street :		P.O. Box :			
Mu	inicipality :		Province : Québec	Postal code :			
Hoi	Home phone number : Emergency number :						
Wo	Work phone number : Email address :						
Ne	eds school bus : \Box	Yes □ No					
Onl	ly one address par pa	ssured when the address is within rent/tutor is accepted for school bu	issing.				
bus	ssilig address il dilleli	ent than that of the parent's addre					
A s <i>écc</i> If y	oles primaires et secono ou want your child to) will be assigned to your child bas ndaires du CSS des Hauts-Bois-de-l o attend a different service point or	<i>'Outaouais</i> procedure pavillon, please indic	•			
CIIC	oice of service point o	r pavillon other than the one assig	neu				
Quebec proof of residence, if student was not born in Quebec : Yes \Box No \Box							
	Signature of par	rent 1 — or of tutor	-	Date			
	Signature of par	rent 2	-	Date			
**	NOTE : Both parent's	signatures are required **					
5 –	- Pre-kindergarten 4 y	EAR OLD					
	ring this past winter , vironnement that your	•	the time? We need to	know the principal type of daycare			
CIIV	monnement that your	cina attenueu.					
		ly daycare environnement which of	•	•			
	In a non subsidized day before taxes	lized family daycare environnement which offers places at a base tarif, for example, of 35 \$ (or more) per es					
	In an early childho d	od center (CPE in french)					
	In a subsidized day o	d daycare which offers places at a base tarif of 8,50 \$ per day					
	In a non subsidized daycare which offers places at a base tarif, for example, of 35 \$ (or more) per day before taxes						
	At the home of a person in your child's entourage						
	At your child's home by a person other than his/her father, mother or one of their spouses.						
	In another type of c	laycare					
	Don't know						
RES	SERVED FOR THE ADMINIS	TRATION					
Dat	te and time that this f	form was recieved :	month – day /	Time			
pro	•	ved and verified the following orig incipal address for admission purp	inal documents prese	nted by the parent or guardian, which give			
Documents received :							
Fan	mily name and first na	ame of the person responsible for t	his admission:				
Sig	Signature of person responsible for admission : Date : Date :						