

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 Language spoken at home : French English

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

Family name : First name :

Date of birth : Birth place :

Education level

PARENT 2

Family name : First name :

Date of birth : Birth place :

Education level

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 : Emergency number :

Work phone number : Email 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 : Emergency number :

Work Phone number : Email 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:

TUTOR

No : Street : P.O. Box :

Municipality : Province : Québec Postal code :

Home phone number : Emergency number :

Work phone number : Email 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:

4 – RESPONDANT OR LEGAL GUARDIAN'S SIGNATURE

A service point (pavillon) will be assigned to your child based on *les critères de répartition et d'inscription des élèves dans les écoles primaires et secondaires du CSS des Hauts-Bois-de-l'Outaouais* procedure. The document is available at all the schools. If you want your child to attend a different service point or pavillon, please indicate your choice.

Choice of service point or pavillon other than the one assigned :

Quebec proof of residence, if student was not born in Quebec : Yes No

Signature of parent 1 – or of tutor

Signature of parent 2

Date

Date

**** NOTE : Both parent's signatures are required ****

5 – PRE-KINDERGARTEN 4 YEAR OLD

During this past winter , where did your child attend most of the time? We need to know the principal type of daycare environnement that your child attended.

☐ In a **subsidized family daycare environnement** which offers places at a base tarif of 9,10 \$ per day

☐ In a **non subsidized family daycare environnement** which offers places at a base tarif, for example, of 35 \$ (or more) per day before taxes

☐ In an **early childhood center** (CPE in french)

☐ In a **subsidized daycare** which offers places at a base tarif of 9,10 \$ 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 daycare**

☐ **Don't know**

RESERVED FOR THE ADMINISTRATION

Date and time that this form was recieved : Year – month – day / Time

I certify that I have received and verified the following original documents presented by the parent or guardian, which give proof to the student's principal address for admission purposes:

Documents submitted : in person electronically

Documents received :

Family name and first name of the person responsible for this admission :

Signature of person responsible for admission : Date :

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