



# Notification to Register in a Home-Based Learning Program

## Student Information

What is the expected date of commencement of the home-based learning program?

In the chart below, please provide the name, gender, date of birth, **LAST** school each student attended, the **LAST** year completed and the **LAST** grade level completed.

Name of Student	Gender	D.O.B.	LAST School Student Attended	Last Year	Last Grade

Please provide the current grade level of each student:

Name of Student	Current Grade Level

## Parent Information

Please provide the name, address, telephone number and email of the parent(s) who are responsible for and who are directing the home-based learning program. In case of the two-parent families, either one parent or both parents may be responsible for the home-based learning program.

Name of Parent(s)	Phone Number	Email
Mailing Address	City/Town	Postal Code
Street Address (if not same as above)	City/Town	Postal Code

The parent or parents who are responsible for and directing the home-based learning program must lawfully have charge and custody of each student on the home-based learning program. If applicable, explain any circumstances such as guardianship, separation, or divorce which relates to the charge and custody of the student(s) on the program.

## Registering Authority

Name of the school division in which the parent(s) reside:

This notification is being sent to:

- |  |   |
|--|---|
| <input type="checkbox"/> FHQ Education | <input type="checkbox"/> Independent Schools & Home-based Education, Ministry of Education. |
|--|---|

If you are sending this notification to the Saskatchewan Ministry of Education, provide compelling reasons why you are doing so.


Declarations		Registration	
<ul style="list-style-type: none"> <li>- We (or I) <i>affirm</i> that the above information is complete and correct.</li> <li>- We (or I) <i>affirm</i> that we (or I) accept the control, direction, and management of the home-based learning program.</li> <li>- We (or I) <i>affirm</i> that we (or I) accept the responsibility for the education of the students on the home-based learning program.</li> <li>- We (or I) <i>affirm</i> our intention to comply with the written educational plan that is attached to this notification form.</li> <li>- We (or I) understand that a false declaration represents grounds for not registering the home-based learning program, or for suspending or cancelling the registration at some future date.</li> </ul>		This notification is in compliance with the Act, Regulations and the policies and this home-based learning program is hereby registered.	
Parent/Guardian	Date		
Parent/Guardian	Date	Registering Authority	Date
In accordance with subsection 26(2) of <i>The Freedom of Information and Protection of Privacy Act</i> , you are advised that the information on this form is being collected solely for the purpose of the registration of your home-based learning program. Personal information will not be disclosed except in compliance with the Act.			

Submit Form:

FOR OFFICE USE ONLY:
SDS#: _____
Canadian Birth Certificate #: _____
Registering Authority School ID #: _____