School District No. 57 Prince George

Indigenous Education Department
#102-155 McDermid Drive
Prince George BC V2M 4T8
Phone: (250) 562-4843
Fax: (250) 561-2520

Self Identification of Indigenous Ancestry

Parent/Guardian Consultation

Indigenous Ancestry is determined on a voluntary basis through self-identification. This includes First Nations (Status or Non-Status), Métis or Inuit Ancestry. No documentation other than this self-identification is required and the ancestry can go back several generations.

Student Legal First Name: _____ **Student Legal Last Name** _____

Birth Date: _____/_____/_____**School:** _____ **Grade:** _____
(month/day/year)

Home Phone #: _____ **Work Phone #:**_____**Cell #:** _____ **E-mail:** _____

CHECK ALL THAT APPLY:

❑ Status ❑ Non-Status ❑ Métis ❑ Inuit ❑ Nation: _____
❑ Band:_____
❑ Clan: _____
❑ Are you living on reserve?
❑Yes ❑No

Indigenous Education Programs/Services

(Not all programs/services are available in all schools)

- Cultural learning activities
- School to Home communication (phone calls, texts, etc.)
- Monitoring of academic progress and attendance
- Special events, presentations, field trips
- Academic Support
- Cultural programs
- Role Model Program/Elders/Knowledge Holders
- Scholarship/Bursary information events

❑ **Academic /Homework Support Requested** ❑ **Other Requests**_____

❑ **I acknowledge that my son/daughter is of Indigenous Ancestry (First Nations, Metis or Inuit) and I am aware of the programs and services available through the Indigenous Education Department.**

PLEASE RETURN THIS FORM TO YOUR CHILD'S SCHOOL

X_____ X_____
Parent/guardian signature *Date signed*

Protection of Privacy:

The information on this form is collected under the authority of the School Act, section 13. The information will be used for education program purposes, transportation contractor if a bus student, and when required, may be provided to health services, social services or other support services as outlined in section 88 and 91 of the School Act. Information collected on this form will be protected under the Freedom of Information and Protection Act. Questions about the collection and use of this information should be directed to the principal of your school or to the Freedom of Information and Protection of Privacy Officer, School District No 57, 2100 Ferry Avenue, Prince George, B.C V2L 4R5

If you have any questions or require further clarification, please call our Indigenous Education Department (250) 562-4843

FOR NEW REGISTRANTS AND / OR TRANSFERS:

FOR OFFICE USE ONLY: (If consultation is other than in person):

Consultation via: ❑ Phone ❑ E-mail ❑Fax ❑Other _____

Consulted with (name): _____ Relationship to Student: _____

_____ _____

SD57 Staff Signature **Date of Consultation**

School: _____

Comments: _____

❑ Academic/Homework Support Requested

❑ Other Request: _____