THE DURHAM DISTRICT SCHOOL BOARD

PRE-REGISTRATION FORM FOR CHILDREN'S AID SOCIETY STUDENTS IN FOSTER CARE/GROUP HOMES

Date School

Principal

Student's Name/Grade M/F Date of Birth (YY/MM/DD)

Student's Legal Status/Signing Authority:

Name of Children's Aid Society Worker Telephone Number

LAST SCHOOL ATTENDED:

Name

Address

City Postal Code

Principal Telephone Number

Name of Foster Parent/Group Home Official

Address

Home Telephone Number Work Telephone Number

Name of Resource Worker Telephone Number

Extra Support Needed:

Does this student exhibit behaviours that present a risk to self and/or others? (Explain).

Identification/Special Placement: