

## **CONFIRMATION OF PUPIL ELIGIBILITY FORM**

Personal information on this form is being collected pursuant to the provisions of the Municipal Freedom of Information and Protection of Privacy Act and under the authority of the Education Act, and will be used for the purposes of determining student eligibility for English as a Second Language/Literacy Development Funding. Questions about this collection should be directed to the Superintendent of Education – Continuing/ Alternative Education, Niagara Catholic District School Board, 427 Rice Road, Welland, Ontario L3C 7C1, 905-735-0240.

PLEASE PRINT			GENDER	GENDER	
Student's Surname		Student's First Name	Female Male Prefer not to disclo Prefer to specify	se	
Date of Birth (yy/mm/dd)	Country of	Birth	Date of First Entry into Canada (yy/mm/do	d)	

	CITIZENSHIP & IMMIGRATION CANADA DOCUMENTATION Documentation examined to verify eligibility. Please indicate by check mark in box next to document)						
	Confirmation of Permanent Residence (P.R.)	Date became a P.R.	(yy/mm/dd)				
	Permanent Resident Card	Date on back of card	(yy/mm/dd)				
	Parent Study Permit *	Expiry Date	(yy/mm/dd)				
	Parent Work Permit *	Expiry Date	(yy/mm/dd)				
	Visitor Record *	Expiry Date	(yy/mm/dd)				
	Refugee Claimant	Date Stamped	(yy/mm/dd)				
	Consideration of Eligibility (Convention Refugee)	Date Stamped	(yy/mm/dd)				
отн	THER DOCUMENTATION						
	Passport *	Date Stamped	(yy/mm/dd)				
	Other (Please specify) Contact Student Information and Administrative Services for	Date Signed/Stamped prior approval if this bo					

## CERTIFICATION

I hereby certify that the information contained on this form is accurate and that I have examined the applicable documentation as indicated.

BOARD/SCHOOL OFFICIAL	PARENT/GUARDIAN
Name	Name
Signature	Signature
Position	Date
Date	

This form must be filed in the student's Ontario Student Record (OSR) and retained for Ministry Audit purposes.

\* Refer to Niagara Catholic District School Board International Student Department