KITSELAS BAND COUNCIL
2225 Gitaus Road, Terrace BC, V8G 0A9
Phone: (250) 635-3301 | Fax: (250) 635-5335

Application for ON RESERVE STUDENTS School Supply Allowance

Student Information:

Last Name:	Select: ☐ Status Indian ☐ Non-Status ☐ Other:	Grade:
Given Names:		School: ☐ Thornhill Primary (K-3) ☐ Thornhill Elementary (4-6) ☐ Skeena Middle ☐ Caledonia Secondary ☐ Parkside Secondary ☐ Centennial Christian ☐ 'Na Aksa Gyilak'yoo (Kitsumkalum) ☐ Other:
Birthdate: (YYYY/MM/DD)	**Status Card Number:**	
Gender: ☐ Female ☐ Male	Band Name: ☐ Kitselas ☐ Other:	
Home Address:		
City/Town & Postal Code:	Email:	
Phone Number:	Cell Phone:	

Lives With:

Select One: ☐ Mr. ☐ Mrs. ☐ Ms.	
Last Name:	
First Name:	
Relationship to Student: ☐ Mother ☐ Stepmother ☐ Aunt ☐ Grand-Mother ☐ Guardian	☐ Father ☐ Stepfather ☐ Uncle ☐ Grand-Father

Note: Form must be completed and returned to calculate school supply allowance.

Please also provide Direct Deposit forms for students in Grade 7 - 12.

T-shirt Size:

☐ S ☐ M ☐ L ☐ XL ☐ Adult L ☐ Adult XL

Office Use Only:

x One Form per Student
Please get additional copies from office.

Consent to Release Student Records

☐ As per section 10.5.1 of the Local Education Agreement, this consent authorizes Coast Mountains School District 82 OR Centennial Christian School OR 'Na Aksa Gyilak'yoo School and its school representatives to release student's academic records to the Kitselas Education Coordinator for my child.

Consent to Release Student Information

☐ I authorize the Education Coordinator to share information about my child with other Kitselas First Nation departments. This information is limited to first name, last name, school, grade and T-shirt size.

Student Name: _____

_____ _____
Parent/Guardian Signature Date

* School supply allowance is restricted to Kitselas nominal roll