

CHILD'S PERSONAL INFORMATION

Last name :		First name :	
Date of birth (yyyy-mm-dd) :			
Address			
Number :	Street :	Apartment :	
Municipality :	Province :	Country :	Postal code :

PARENTS' PERSONAL INFORMATION

Last name of first parent :		First name of first parent :	
Address of first parent (if different from the child's address)			
Number :	Street :	Apartment :	
Municipality :	Province :	Country :	Postal code :
Telephone (home) :		Telephone (other) :	

Last name of second parent :		First name of second parent :	
Address of second parent (if different from the child's address)			
Number :	Street :	Number :	
Municipality :	Province :	Municipality :	Province :
Telephone (home) :		Telephone (other) :	

ACADEMIC INFORMATION

Date on which the child stopped or will stop attending an educational institution (yyyy-mm-dd) :	Permanent code, if applicable :
School board currently responsible for the child's education :	
School board to which this form is being sent (if different from the school board currently responsible for the child's education) :	
<i>Note : Enter the name of the relevant school board, if applicable. If you choose an English-language school board, your child must be eligible to attend school in English.</i>	

Signature of first parent :	Date (yyyy-mm-dd) :
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Signature of second parent :	Date (yyyy-mm-dd) :
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Email, fax or mail this form to the Minister.

Email: dem@education.gouv.qc.ca

Fax: 514-864-8921

Mailing address: Direction de l'enseignement à la maison, Ministère de l'Éducation et de l'Enseignement supérieur, 600, rue Fullum, 8ème étage, Montréal (Québec) H2K 4L1

To find out which school board to send the form to, consult www.education.gouv.qc.ca/trouver-une-commission-scolaire.