

Grade 1 - 12 Non-Residency Agreement

We, the parents/guardians of _____
(name of student)

understand that our child is eligible for programming from Sturgeon Public Schools for the academic year of _____ in accordance with Alberta Education qualifications.

We understand that we are residents of _____
(town/city/county)

and our child may not be placed in any Sturgeon Public Schools school for the following school year. He/she will be considered for acceptance if there is room in the school and the resources are available to provide an appropriate program.

Signature of Parent/Guardian

Date

cc: Parents/Guardians
Student Record File

In accordance with the Freedom of Information and Protection of Privacy Act (FOIP), The Sturgeon School Division is authorized and required under the provisions of the Education Act and its regulations to collect, use and disclose personal information that is necessary to provide educational programming and ensure a safe and secure school environment for students.

