



ST. MARY'S FIRST NATION EDUCATION DEPARTMENT

---

**For the School Year 2020-2021**

Parent's Name: \_\_\_\_\_ Band# \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Email: \_\_\_\_\_

Student Information: (Please Print)

First Name	Last Name	Student DOB	Name of School	Grade	Band Number

**I give permission to St. Mary's Education Department to receive my child's final report card for the purpose of the Year End Awards**

YES \_\_\_\_\_ NO \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_