# Appendix 1

**Request for Resources and Instructional Materials**

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| **PERSONAL IDENTIFICATION** |
| Date of the Request: |  |
| Last name, First Name of Student: |  |
| Student’s Permanent Code (if available): |  |
| Date of Birth: |  |
| Last name, First Name of Parent: |  |
| Address: |  |
| Parent’s Email Address: |  |
| Parent’s Telephone Number: |  |

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| **CHOOSE THE RESOURCE** |
| Classroom | Science lab |
| Library | Gymnasium |
| Visual Arts room | Drama room |

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| **TITLE OF ACTIVITY (ONE ACTIVITY PER FORM) :** |
| **Detailed description of activity:** |
| **List of all instructional material requested (only this material will be available):** |
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| **SPACE RESERVED FOR SCHOOL BOARD** |
| Name(s) of supervising adult(s) (maximum two) \*:1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 |
| **Request accepted Request denied**Reason for denied request: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Homeschool Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Provided recent (within 2 years) police check: Yes No |



Parent’s/Guardian’s Name

Parent’s/Guardian’s Signature

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Date

Please return this form to **WQSB Homeschooling** at the following email address: homeschooling@wqsb.qc.ca