



WILD ROSE PUBLIC SCHOOLS ENFORCING SCHOOL ATTENDANCE

Request for Visit by Attendance Officer

Please ensure ALL areas are filled in.

Name of Student:

FNMI Yes No

Age of Student:

Date of Birth:

School:

Grade:

Name of Parents/Legal Guardians:

Address of Parents/Legal Guardians:

Land Location:

Telephone Number:

Residence:

Business:

Attendance Record:

Additional Information: Attach records & copies of contacts: meetings, telephone calls, letters & dates relating to student attendance.

Comments:

Signature of School Administrator

Date:

Please submit to: Christopher MacPhee at WRPS Division Office

Forwarded to Attendance Officer

Date: _____