

HOMESCHOOLING REQUEST FORM

Access to Student Services

Legal Framework: Homeschooling Regulation, Education Act, c. I-13.3, s. 15, 1st par., subpar. 4 and s. 448.1

Personal Information	
Date:	
Student Name (Family/First Name):	
Grade Level:	
Permanent Code (if available):	
Birthdate:	
Home Address:	
Email Address:	
Home Phone Number:	

Student Services	
Psychological Assessment	<input type="checkbox"/>
Psychoeducational Services	<input type="checkbox"/>
Speech/Language Assessment	<input type="checkbox"/>
Remedial Ed. Services	<input type="checkbox"/>
Academic/Career Counseling	<input type="checkbox"/>

Detailed description of your child's difficulties and reasons for the requested service: