

Essential School Supplies Application Form (K5 to Grade 12) (CHILD MUST BE SELKIRK FIRST NATION CITIZEN)

Please return application with receipts to the above address ATTENTION: CITIZEN DEVELOPMENT DEPARTMENT.

**All Receipts must be submitted for reimbursement **

Parent or Legal Guardi	an Name:						
Mailing Address							
Street Address or PO Box							
City		Territory/Province		Postal Code			
Telephone		Email Address					
Cheque Payee:							
	Please note:	K5 to grade 7 – will be issued Grade 8 to 12 – will be issued	-	-			
		Dependent Ch	ildren				
Name of Children(s)	DOB	Name of School Address &		Enrollment J#	Grade	Allocation	
Signature:	and Consider	Date:					
Parent or Le	egal Guardian						
Cheque Requisition:		DEPARTMENTAL US	SE ONLY				
Expense Code:	Department Code:		Tota	Total Allocation Approved:			
Reference No.:	Approved By:			Date:			
FINANCE USE ONLY							

Int.

Cheque #_

Date Issued: