

SD43 Kindergarten Cross Catchment On-line eForm Instructions

After all required information is completed, a submit button will become visible at the bottom of the form. Once the form has been submitted it will be reviewed by district staff for completeness, and a confirmation receipt e-mail will be sent to the e-mail address specified on the form. You should receive the confirmation email within 2 Business Days of submitting the application.

Section 1: Applicant Information

Required Information:

Gender
Last Name
First Name
Birth Date (mm/dd/yyyy)
Home Address
City
Postal Code
Phone Number (###) ###-####
Parent's Work Number (###) ###-####
Name of School Student is registered at for 2011/2012 school year

Section 2: Must complete either Part A or Part B

Required Information:

Part A: Confirmation of Sibling Status

Sibling Information:
Sibling Name:
School Sibling Attending: (Select from drop down list)
Indicate Program requested: English or French (option will only show for schools offering both programs)
Sibling Age:
Sibling Grade in 2011/2012: (Select from drop down list)

Part B: Cross Catchment Request (for September)

Indicate your **First Choice** for school requested: (Select from drop down list)
Indicate your **Second Choice** for school requested: (Select from drop down list)
Indicate Program requested: English or French (option will only show for schools offering both programs)

Section 3: Parent / Guardian

Required Information:

Name:
E-mail
E-mail confirmation:
(By typing your e-mail address in the boxes, you are digitally signing the form)