



2020/2021 Indigenous Education Program Principal: name & extension V.P. name & extension (if applicable) INED Contact Person(s): Teacher if applicable & I.S.W.: name Phone #: (250) 770 - Ext: teacher or Ext: ISW	School Logo here
--	------------------

Dear Parents/Guardians of:

Date:

Self-Identification of Indigenous Ancestry (First Nations, Métis, or Inuit): Indigenous ancestry is determined on a voluntary basis through self-identification. No documentation is required.

The Indigenous Education Department in SD67 offers various supports and opportunities for students of Indigenous ancestry. Our goal is to enhance educational, social, and cultural opportunities for all Indigenous students.

Some of the optional highlights of participating in the Indigenous Education program include:

- **Unique cultural opportunities**
- **In-class Support**
- **Advocacy**
- **In-school program opportunities**
- **Scholarship, bursary, and post-secondary and community program opportunities**

The Indigenous Education department employs **Indigenous Educational Teachers, Support Workers, a Cultural Advisor, a Syilx Language Teacher, a Family Support Worker and a District Principal** that support all students of Indigenous ancestry who are enrolled in our district.

If you would like your child to have access to the Indigenous Education programs and services in School District 67, PLEASE COMPLETE the information of the reverse side of this form.

If you have any questions about the Indigenous Education program, please contact the INED staff member at your child's school. You may also contact Allen Beckingham, District Principal of District Programs and Curriculum, at (250) 770-7700 ext. 6453 or by email at abeckingham@summer.com.



2019/2020 Indigenous Education Program Principal: name & extension V.P. name & extension (if applicable) INED Contact Person(s): Teacher if applicable & I.S.W.: name Phone #: (250) 770 - Ext: teacher or Ext: ISW	School logo here
--	------------------

Date: _____ **Daughter/Son Name:** _____

Grade (in 2019/20): _____ **School (in 2019/20):** _____

Please check off the box(es) below to indicate Indigenous ancestry for your daughter/son:

- Status
- Band name: _____
- Living: on reserve or off reserve
- Non-status
- Métis
- Inuit

Self-Identification of Indigenous Ancestry (First Nations, Métis, or Inuit): Indigenous ancestry is determined on a voluntary basis through self-identification. **No documentation is required.**

My signature confirms that I have identified my daughter/son as having Indigenous Ancestry.

I wish to have her/him access Indigenous Education programs and services.

Parent/Guardian Name: _____ **Parent/Guardian Signature:** _____

Phone Number: _____ **Parent email (if applicable):** _____

To be filled in by SD67 staff member only if verbal consent to participate in the Indigenous program was provided:

If parent/guardian provided VERBAL consent:

Date: _____

Parent/Guardian name: _____

Verbal consent

Consent granted to (SD67 staff person): _____