

## International Student Program Confirmation of Parent Living with Student

Student's Name:						
		Last N	lame (Family Na	ame)	Given Name	Preferred Name
Date of	f Birth:					
		Year	Month	Day		
то.	Intorna	tional E	ducation			
то:	: International Education Burnaby School District					
		,				
1.					am the paren	t of the above-named student and hereby
confirm that I will be residing with my child for the duration of their studies in Burnaby.						
If I am to be absent:  1. It will be for a brief period of time, and 2. I will provide advance notice to International Education and my child's school advising of the:  o duration of my absence  name of the adult(s) my child will be residing with during my absence, along with their age, relationship to the student, and contact information.  I am aware that failure to adhere to the conditions noted above may jeopardize my child's continued						
participation in the International Student Program and no refund will be provided.						
Parent I	Last Nam	Δ.				First Name
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Parent Signature					_	Date
Updated:	October 202	23				