



**PRINCE ALBERT** Est. 1887  
**CATHOLIC SCHOOL DIVISION**  
*Learning for life through Catholic Education*

**REQUEST FOR CONFIDENTIAL INFORMATION**

**(During a period not to exceed 90 days from the date of this document)**

Student's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Day / Month / Year

School \_\_\_\_\_ Parent's Name \_\_\_\_\_

Home Address \_\_\_\_\_  
\_\_\_\_\_

Information has been requested from the following agency:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
School Personnel \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Superintendent of Education \_\_\_\_\_ Date \_\_\_\_\_  
(Student Support Services)

**CONSENT:**

I hereby consent the release of confidential information to Prince Albert R.C.S.S.D. #6.  
This information will be used by school personnel to assist with my child's education.

\_\_\_\_\_  
Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

**Information can be forwarded to:** Prince Albert R.C.S.S.D. #6  
118 – 11<sup>th</sup> Street E.  
Prince Albert, SK S6V 1A1  
Attention: \_\_\_\_\_  
School: \_\_\_\_\_