Village of Forestburg Kirschman Bursary Program

Student Registration Confirmation Form

Students Name: _____

Did this Student Graduate from Forestburg School with the requisite number of credits:

Please circle: YES / NO

If "YES", what year did they Graduate?

_____

Year of Graduation

How many years was this Student enrolled in Forestburg School? (NOTE: only one year per grade level is to be counted in calculation of Total Enrolled Years)

_____

Total number of Years and specific years attended (e.g. 7 = 2015-2022)

Were any of the Years Attended of enrollment less than a full year/full-time studies?

Please circle: YES / NO

If "YES" please indicate the Year(s)

_____

YEAR(S)

_____

SIGNED – Principal or Designate – Forestburg School