PARENT DECLARATION FORM FOR EXTENDED PARENT/GUARDIAN ABSENCE

This form must be completed and submitted to the school principal if a student is under the care of another adult (25 years or older) during an extended absence of the parent or legal guardian. All fields are required.

Student Information

Student Full Name: _____
Grade: _____
School Name: _____
Start Date of Parent or Legal Guardian Absence: _____
End Date of Parent or Legal Guardian Absence: _____

Responsible Adult Information (25 years or older)

Full Name: _____
Relationship to Student: _____
Address: _____
Phone Number: _____
Email Address: _____

Out-of-Town Parent/Guardian Contact Information

Full Name: _____
Phone Number: _____
Email Address: _____
Temporary Address During Absence: _____

Declaration

I hereby declare that the information provided above is accurate and complete.
Parent/Legal Guardian Signature: _____ Date: _____
Principal Signature: _____ Date: _____

Adopted: August 2025
Revised:

Modification to this document is not permitted without prior written consent from New Westminster Schools.