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| **Ttes & SIN Day Scholar & Descendant Class List** | | | | | | | |
| **Day Scholar Name :** | **Date of Birth:** | **Nation:** | **Band #** | **School Attended:** | **# Years Attended as DS** | **Telephone:** | **Address** |
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| **Descendant Class or Names of children Name:** | **Date of Birth:** | **Nation** | **Band #** | **N/Applicable** | **N/Applicable** | **Telephone:** | **Address:** |
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| \***Please fill in this form to the best of your ability, the top half portion is for the Day Scholars names & bottom portion is to record the children names of Day Scholars**  **If your Day Scholar parent is deceased, please still fill in the portion of your parent(s) name & names of the children.**  **This information will be extremely helpful in assisting us in ensuring utmost accuracy of Day Scholars & Descendant Class Survivors.**  ***Note: this form is for negotiation purpose only & is not a formal application for compensation*** | | | | | | | |