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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***  |