



Community Living Society

Confirmation of School Attendance

This form can be filled in online before printing and signing.

Extended Health & Dental Plan

Employee #

Employee Last Name

Employee First Name

Children between the ages of 21 - 25 years must be registered as full time students in order to be covered.

If your son or daughter was registered as full time student, attending an educational institution recognized under the Income Tax Act (Canada), would you please confirm the school attendance by completing the following part of this form and forward to the CLS Finance Department.

Confirmation of School Attendance

This section is to be completed only if your dependant children are between the ages of 21 - 25 years and attending a recognized school establishment, on a full time basis.

Given Name(s)	Student ID#	Name of the Establishment	Beginning of Attendance Period	Ending of the Attendance Period	Establishment's Phone Number
Child			Month/Day/Year	Month/Day/Year	()
Child			Month/Day/Year	Month/Day/Year	()
Child			Month/Day/Year	Month/Day/Year	()

CLS reserves the right to confirm the above information with the school attended.

Signature of Participant _____ Date _____

Thank you in advance for your kind cooperation.