



Kanehsatake Education Center  
14 Joseph Swan, Kanehsatake, QC J0N 1E0

## CONFIRMATION OF ATTENDANCE & ENROLMENT POST SECONDARY STUDENTS

I \_\_\_\_\_ (print full name) declare that I have attended classes on a regular basis, and that I am registered as a full time student at \_\_\_\_\_ (name of school) for the month of \_\_\_\_\_, 20\_\_\_\_. (present month)

Signed \_\_\_\_\_ Date \_\_\_\_\_

**To receive living allowance for the next month, you must complete the form and return it to the Kanehsatake Education Center by the 22<sup>nd</sup> of each month. Your living allowance cheque will not be sent until we receive the completed form.**

(example): To receive your living allowance cheque for October the form would say for the month of (Sept. 2011), dated and signed .

**False information will result in the termination of living allowance funding for the remainder of your eligible school years.**