



**The Board of Education of
School District No. 83
(North Okanagan-Shuswap)**

P.O. Box 129 ~341 Shuswap St. S.W. ~ Salmon Arm, B.C. V1E 4N2
Phone: (250) 832-2157 Fax: (250) 832-9428

AUTHORIZATION FOR TEMPORARY GUARDIANSHIP OF MINOR

Child:

Full Legal Name: _____

Date of Birth: _____

Parent(s)/Legal Guardian(s):

Parent #1:

Name: _____

Address: _____

Home phone: _____ Work phone: _____

Cell phone: _____ Email: _____

Additional Contact

Information: _____

Parent #2:

Name: _____

Address: _____

Home phone: _____ Work phone: _____

Cell phone: _____

Email: _____

Additional Contact

Information: _____

Temporary Guardian(s):

Temporary Guardian #1:

Name: _____

Address: _____

Home phone: _____ Work phone: _____

Cell phone: _____ Email: _____

Additional Contact

Information: _____

Temporary Guardian #2:

Name: _____

Address: _____

Home phone: _____ Work phone: _____

Cell phone: _____ Email: _____

Additional Contact

Information: _____

Emergency Contact:

Name: _____

Address: _____

Home phone: _____ Work phone: _____

Cell phone: _____ Email: _____

Additional Contact

Information: _____

AUTHORIZATION AND CONSENT OF PARENT(S) OR LEGAL GUARDIAN(S)

1. I hereby declare that I have legal custody of the above named child.
2. I hereby grant my full permission and consent for the temporary guardian to establish a place of residence for my child, and for my child to reside with said temporary guardian.
3. I hereby grant the temporary guardian my full authorization to make all decisions related to my child's educational activities and undertakings.
4. I hereby grant permission for the staff of North Okanagan- Shuswap School District #83 to communicate with the temporary guardian regarding school matters including, but not limited to: attendance, performance, discipline, emergency situations, field trip consent.
5. This authorization is effective commencing on the _____day of _____, 20____ and expiring on the _____day of _____, 20_____.
6. In the event that more than one legal guardian exists, the use of the singular shall incorporate the plural. In the event that more than one temporary guardian is named, the use of the singular shall incorporate the plural.

I attest to the truthfulness, accuracy, and validity of the forgoing statement.

Parent #1's signature: _____ Date: _____

Parent#2's signature: _____ Date: _____

CONSENT OF TEMPORARY GUARDIAN

I hereby acknowledge the terms set forth above and agree to assume responsibility in accordance with those terms.

I attest to the truthfulness, accuracy, and validity of the forgoing statement.

Temporary Guardian 1's signature: _____ Date: _____

Temporary Guardian 2's signature: _____ Date: _____

CERTIFICATE OF ACKNOWLEDGMENT OF NOTARY PUBLIC:

The signature of _____

Witnessed at _____

This _____ day of _____, 20_____.

(A Notary Public in and for the Province of B.C.)

(To be legal, this letter needs to be notarized)