



LEARNING
FROM HOME
SCHOOL



L'ÉCOLE
APPRENDRE
CHEZ-SOI

Student's Legal Name: _____

Current School Division : _____

Current School: _____

Current Grade : 09 10 11 12

Name of school counselor: _____

School counselor's email address: _____

I have permission from my current school to register for an online course with LRSD.

Yes No

This form is being submitted by the school student services or administration team.

Yes No

Is this an application for a student who is homeschooled and registered with the [Manitoba Homeschool Office](#)

Yes No

If yes, please ensure that you have filled out and submitted the [appropriate documentation](#) to the Manitoba Homeschool Office.

Who will be paying the fees for the course(s)?

School Division School Student