



NORTHERN NISHNAWBE EDUCATION COUNCIL
STUDENT SERVICES
 315 North Edward Street
 Thunder Bay, Ontario P7C 4P3



Phone: (807) 628-8413

Fax: (807) 475-9723

Toll Free: (866) 530-8590

PERSONAL INFORMATION

Applicant Information

Name: _____

Address: _____

Phone No.: _____ - _____ - _____

Email: _____

Marital Status:

Married Common Law

Single Separate

Employment:

Employer: _____

Occupation: _____

Work No.: _____ - _____ - _____

SPOUSE INFORMATION

Name: _____

Employment:

Employer: _____

Occupation: _____

Work No.: _____ - _____ - _____

HOUSEHOLD INFORMATION
 OTHER MEMBERS OF HOUSEHOLD

First & Last Name	DOB (d/m/y)	Relationship to Boarding Parent
• _____	(____ / ____ / ____)	_____
• _____	(____ / ____ / ____)	_____
• _____	(____ / ____ / ____)	_____

Primary Language Spoken: _____ **Other Languages Spoken:** _____

Type of Housing:

Bungalow Duplex/Multiplex Apartment Other: Explain _____

of Bedrooms: _____ **# of Bathrooms:** _____ **Laundry:** Yes / No **Study/Den Facilities:** Yes No

DATA CLERK USE ONLY

DATE: _____ **INTERVIEWED:** Yes / No

WORKER: _____ **HOME INSPECTION:** Yes / No

HOME STATUS: Approved Not Approved