

ORDINARILY RESIDENT FORM

Student Last Name:	Date of departure:
Student First Name:	Expected date of return:
Student Last Name:	Student Last Name:
Student First Name:	Student First Name:
Canadian Address:	Out of Country Address:
Mother/Guardian First & Last Name:	Father/Guardian First & Last Name:
Mother Email address:	Father Email address:
Mother Phone Number:	Father Phone Number:
Do you own a residence, rent or have a long ter	
Is one of the parents or siblings residing in the f	
	•
Do you have a valid BC provincial driver's licens	e? Uyes Uno
Do you have an automobile registered in BC?☐	ves 🗆 no
Do you have Canadian bank accounts and credit	, es =e
bo you have canadian bank accounts and creak	•
Do you file income tax as a BC resident?□yes □	, t cards?□yes □no
,	, t cards?□yes □no Ino
Do you file income tax as a BC resident?□yes □	, t cards?□yes □no Ino MSP coverage?□yes □no
. Do you file income tax as a BC resident?□yes □ Do you pay monthly health insurance including	, t cards?□yes □no Ino MSP coverage?□yes □no Iyes □no



Which of the following applies to your situation?

	Ino
Parent or Guardian have foreign bank accounts or credit cards. □yes □no	
One or both parents are employed outside of BC. □yes □no Parent or Guardian is filing income tax in another jurisdiction. □yes □no	
Parent/Guardian Signature Date	
Office use:	
This family is deemed to Ordinarily Reside in the province of British Columbia and is therefore	
eligible for education funding through the BC Ministry of Education.	
Principal/Superintendent Signature: Date:	
Once completed, please print, sign and email to: admissions@chekabc.ca.	
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