



**SECONDARY RELIGIOUS EDUCATION  
EXEMPTION REQUEST APPLICATION**

This form must be completed in full and returned along with the appropriate documents to the Superintendent of Education. Application must be received before the start of the semester.

***Requests are considered on an annual basis.***

**STUDENT INFORMATION**

Full Name:		Current School:	
Date of birth: (d / m / y )	Grade (Exemption):	Phone:	
Current address:			
City:	Province:	Postal Code:	
Previous Elementary School(s):		How long?	
Previous Secondary School(s):		How long?	

**PARENT/GUARDIAN/ADULT STUDENT MAKING APPLICATION  
APPLICATION DEADLINE – PRIOR TO THE START OF THE SEMESTER**

Application Date:			
<b>Parent #1:</b>		Signature:	
Address:			
City:	Province:	Postal Code:	
Home Phone:	Cell Phone:	Bus. Phone:	
<b>Parent #2:</b>		Signature:	
Address:			
City:	Province:	Postal Code:	
Home Phone:	Cell Phone:	Bus. Phone:	

**APPLICANT: ATTACH THE FOLLOWING TO APPLICATION AND SUBMIT TO PRINCIPAL**

Latest Municipal Tax Assessment (MPAC)

**APPLICANT: SELECT THE COURSES AND ACTIVITIES YOU WISH TO BE EXEMPT FROM**

Religion Course Only

Activities of a Religious Nature with a Substantial Component of Ritual and Prayer  
(if yes, select from list of Activities)

Religion Course and Activities of a Religious Nature with a Substantial Component of Ritual and Prayer

Other: \_\_\_\_\_  
\_\_\_\_\_

**TO BE COMPLETED BY THE SCHOOL**

<b>Attach the following:</b>	<b>Timetable: Semester One</b>	<b>Timetable: Semester Two</b>
<input type="checkbox"/> Ontario Student Transcript <input type="checkbox"/> Ontario Student Status Sheet <input type="checkbox"/> Copy of Parent Baptismal Certificate <input type="checkbox"/> Copy of Elementary Registration Form	1. 2. 3. 4.	1. 2. 3. 4.
Principal Signature:		Date:
<b>BOARD OFFICE ONLY</b>		
<b>Committee Decision:</b> Eligible ( ) Not Eligible ( ) Signature: _____ Date: _____		

Routing:

Applicant to Principal

Principal to Superintendent of Education