



EDU-INTER INTERNATIONAL FRENCH SCHOOL

Custodianship declaration - Custodian

Student

Student Number:

Name in Full:

Date of Birth:

Sex:

Citizenship:

Name of School in Canada: **Edu-Inter**

Parents

Father (Full Name):

Date of Birth:

Mother (Full Name):

Date of Birth:

Address:

City:

Postal Code:

Country:

Custodian

Name in Full: **Mr. Sylvain Langlois**

Date of Birth: **November 18, 1973**

Present Address: 2186 Rue de Riverains, Saint Augustin de Desmaures, Quebec, Qc, G3A 1W7, Canada

Phone Number: 1 418 2041033 Cell Number: 1 418 5754137 Fax: 1 418 380 9879.

Attachment:

The application of the official seal below confirms that the notary public has received evidence that the custodian is a Canadian citizen or a permanent resident, is over 19 years of age, and currently resides at the home address stated above.

I, _____ (name of custodian), hereby solemnly declare that I will undertake the full custodianship for the said student, _____ (name of student), during his/her stay in Canada, while under the age of majority in the province in which he/she resides. As a custodian, I have made the necessary arrangements for the care and support of the said student in place of the parents as appropriate. By signing this custodian agreement, I certify that I reside within a reasonable distance of the student's intended residence and school and will be able to fulfil my obligations as a custodian in the event of an emergency.

Signature of custodian: _____ Date: _____

Sworn before me at: _____ (city), in the province of _____ (province/territory),
_____ Country (if applicable).

This ____ day of _____ (month), _____ (year)

Signature of notary: _____ Official seal of Notary Public

Edu-inter
