APPENDIX 1 TO ANNEX B
EXTERNAL CREDENTIALING DOCUMENT
STUDENT INTENTION AND COMPLETION FORMS REGARDING EXTERNAL CREDENTIALS
STUDENT INTENTION FORM

Student Information:
1. Name
2. School
3. Current Grade
4. School Student ID (if applicable)
5. Home Address and Postal Code
6. Home Phone
7. Email

External Program Provider Information:
1. Organization Name
2. Course title
3. Address and Postal Code
4. Phone
5. Email

Approval Signatures:

Student ____________________________  Date _________

Parent/ Guardian ____________________________  Date _________

External Program Provider ____________________________  Date _________

Position ____________________________

School Principal ____________________________  Date _________

Students shall ensure a signed copy of this application is provided to each of the signatories.
• Students shall attach a copy of completed and signed Appendix 1 to Appendix 2 before submission for signature.
• Appendix 2 must not be signed until the successful completion of the course.

This signed statement is to authorize that the student named in Appendix 1 has completed the requirements of the course listed on Appendix 1 for External Credentialing. Attached are the appropriate certification materials.
Signed: ___________________________________________
Position: ___________________________________________
Date: _______________________________________________