



BOX 78
DERWENT, AB, T0B 1C0
WISDOMHOMESCHOOLING.COM

WISDOM
HOME SCHOOLING

780-741-2113
OFFICE@WISDOMHOMESCHOOLING.COM

FAMILY FORM

Please complete this form once per family.

FAMILY INFORMATION

1. School Year you are Notifying for: _____
2. Student(s) Legal Name(s): _____
3. Mother (Given) Name: _____
Phone number (mobile/work/home): _____
4. Father (Given) Name: _____
Phone number (mobile/work/home): _____
5. Do parents live together? Yes No
 - a. If not, which parent is primarily responsible for the education of the student: _____
6. Additional parent/guardian(s) who may have access to student information: _____

7. Neuro-diverse/Special Needs Student(s): Yes No
 - a. If yes, list any applicable diagnoses: _____
 - b. Suspected but not diagnosed: _____

Additional Details:

EXPERIENCE & SUPPORT

8. Do you have past home educating experience? Yes No

If yes, choose the mode(s) you have experience with:

Home Education (“Traditional”)

School-delivered (“Online” or “Aligned”)

Shared Responsibility (“Blended”)
9. Have you home schooled with WISDOM in the past? Yes No
10. Do you have a support system (ie family, friends, homeschool network)? Yes No
11. Would you like to connect with your local Parent Advisory Council members? Yes No
12. Have you met with or talked to a WISDOM Facilitator? Yes No
13. Specific Facilitator Request: _____
We do our best to accommodate requests.

COMMUNICATION

14. The bi-monthly WISDOM Family Magazine is available to you in two formats. Please choose Paper Digital
15. Join WISDOM's Social Network to share names of parents, students, email address, city, phone number with other WISDOM families within the network. List may NOT be shared outside of this Network.
I wish to join the Social Network: Yes No
16. Have you received an information package from us? Yes No
If no, would you like to receive one? Yes No
17. Email address(es) where you wish to receive communication:
Name of recipient: _____
Primary email address: _____
Name of recipient: _____
Secondary email address: _____

GETTING TO KNOW YOU

Optional questions that assist us in matching you with a facilitator and help us to serve you best.

18. Are there other children in the family whom you are not enrolling at this time? Yes No
19. We are interested in these approaches to home education:
Classical Education
Highly Structured
Unschooling/Delight Directed
World Schooling (plan to travel extensively)
Eclectic
Other: _____
20. We are considering the following path(s) through high school:
Alberta Diploma
AB Education Transcript of Core Courses
Parent Authorized Diploma and Transcript
No Formal Completion/Directly into post-secondary/Trade/world of work
Other/Undecided _____
21. Why did you choose WISDOM?

Gilbertine Institute (WISDOM Home Schooling's school authority), and other private schools are subject to the provincial Personal Information Privacy Act (PIPA) and the federal Personal Information Protection and Electronic Documents Act (PIPEDA). These laws are intended to protect privacy. We must protect your names, contact information, school/health records, and images. We take care when we communicate personal information, and we must ensure proper record keeping. We must obtain your voluntary consent to collect, store, and distribute this personal information.

By submitting this information, you hereby agree to share such private information as this form contains with the WISDOM Home Schooling team for the purposes of effectively serving your family this home education year.