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WISDOMHOMESCHOOLING.COM

**WISDOM**  
HOME SCHOOLING

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# 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: \_\_\_\_\_
4. Father (Given) Name: \_\_\_\_\_
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?

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_