You must be able to answer YES to both of the following questions in order to qualify to fill out the form:

- **1.** Have you attended a Federally Run and Operated Residential School? (Please refer to the attached list of Certified Residential Schools): Yes No
- 2. Did you return home every night, while other children got to stay at the school as residents? Yes No
 If you answered NO to either of these questions the Day Scholar Class Action does not affect you. If you answered YES please fill in the form.

*Please fill in this form to the best of your ability and send it back to us; the top half portion is for the Day Scholar Survivors names & the bottom portion is to record the names of the Day Scholars children.(son/daughter only)

If your parent was a Day Scholar and is now deceased, please put (deceased) in brackets note that you were the one to fill in the form with your name and contact information. Or have the Executor of the Estate fill in the form.

Note: this form is for negotiation purpose only & is not a formal application for compensation.

Ttes & SIN Day Scholar & Descendant Class List Status #/ Name of Day Scholar Telephone: Date of Birth: Nation: Residential # Years Address Treaty # Attended as (your name): School a Dav Attended: Scholar Date of Birth: Status #/ N/Applicable N/Applicable Telephone: **Descendant Class** Nation: Address: Treaty # (write the names of your children-son or daughter): N/A N/A

Any questions contact Jo-Anne Gottfriedson phone: 250-828-9788; Fax:250-372-8833; email: jo-anne.gottfriedson@kib.ca