



# NORKAM SECONDARY SCHOOL

● 730-12<sup>TH</sup> STREET ●  
KAMLOOPS, BC  
V2B 3C1  
(250) 376-1272  
● (250) 377-2225 (FAX) ●

## INDIGENOUS PROGRAMS AND SERVICES CONSENT

DATE: \_\_\_\_\_ SCHOOL YEAR: 2025 - 2026

STUDENT NAME \_\_\_\_\_  
(please print)

Dear Parent/Guardian:

School Districts receive additional funding for students who self-identify as being Indigenous Ancestry for the purpose of providing programs and services over and above regular school services around culture, language, identity, parent and community engagement, and student success. In School District #73(Kamloops-Thompson), this funding is allocated to offer Indigenous programming and services in schools.

According to our records your child/youth has been identified as being of Indigenous Ancestry; and we would like to include your child in Indigenous programs and Services. School Districts require annual confirmation by the ministry of Education.

If you agree, please sign the permission form below or contact the school prior to September 19, 2025. If you do not wish your child/youth to participate, or if our information is incorrect, please check that you wish to decline the programming and services below or let the school office know prior to September 19, 2025. A complete list of programs and services that our district offers is available on the School District 73 website at [www.sd73.bc.ca](http://www.sd73.bc.ca)

If you have any questions or require further information regarding this initiative, please contact the First Nations Education/Support Workers at NorKam Secondary or Mr. Mike Bowden, District Principal of Indigenous Education at 250-376-2266 or email at [mbowden@sd73.bc.ca](mailto:mbowden@sd73.bc.ca).

### PLEASE COMPLETE SECTION BELOW IF YOUR CHILD HAS INDIGENOUS ANCESTRY ONLY

Name of Student: \_\_\_\_\_ Grade \_\_\_\_\_

Parent/Guardian Name (please print) \_\_\_\_\_

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

Please select: Status off Reserve  Metis  Inuit  Non-Status  Status on Reserve

Band of Origin: \_\_\_\_\_ DIA# \_\_\_\_\_

Band of Residence: \_\_\_\_\_ DIA# \_\_\_\_\_

***I confirm that my child has Indigenous Ancestry; please allow my child to participate in any Indigenous Education and/or support services at NorKam Secondary School***

***I confirm that my child has Indigenous Ancestry; however, I decline the programming and/or support services being offered at NorKam Secondary School***

### THANK YOU FOR COMPLETING THIS CONSENT FORM