



Muskeg Lake Post-Secondary Program
P.O. Box 225
Marcelin, Saskatchewan
S0J 1R0
Tel: (306) 466- 4959
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Declaration Form

I declare that I am a full-time/part-time student as defined by the Muskeg Lake Post-Secondary program. Students please make copies and submit a declaration form to the post-secondary office by the 20th of each month.

Name (print): _____

Institution: _____

Program of Study: _____

Month: _____ Year: _____

Student Signature: _____

Date: _____

Instructor Signature: _____

Instructor (print name): _____

Instructor phone #: _____

Note: Your academic advisor or instructor of any of your classes may sign to confirm that you are a registered student attending class.

*** There are no legal issues attached to the form it is merely to confirm that the student is indeed attending classes to ensure continual post-secondary funding.

If you have any questions or concerns, please call (306) 466-4959 or (306)466-6360 or email pwledoux@muskeglake.com

Paul W. Ledoux
Post-Secondary Counsellor