

**SASKATCHEWAN-QUÉBEC STUDENT EXCHANGE PROGRAM
2019-20
SCHOOL DIVISION REQUEST TO PARTICIPATE FORM**

1. School divisions wishing to participate accept all conditions of the exchange as outlined in the information package (see attached).
 2. The "Participation Request Form" must be signed and forwarded to the Programs Branch by **December 21, 2018**.
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1. School Division _____
Address _____
Postal Code _____
 2. Contact Person - School Division _____
Title _____
Email _____
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3. Please list the school(s) in your school division that would like to participate in the Saskatchewan-Québec Student Exchange Program in 2019-20.

The application forms will then be sent to the schools from the Ministry of Education.

- School _____
Address _____
Telephone _____
Liaison Teacher _____
Email _____

- School _____
 Address _____
 Telephone _____
 Liaison Teacher _____
 Email _____

- School _____
 Address _____
 Telephone _____
 Liaison Teacher _____
 Email _____

- School _____
 Address _____
 Telephone _____
 Liaison Teacher _____
 Email _____

SIGNATURE _____
School Division Contact Person

Return by December 21, 2018 to:

Provincial Coordinator
 Programs Branch
 409A Park Street
 Regina, SK S4N 5B2