School Attendance Declaration

To Accompany

A. Brian Simmons Scholarship Application

l,		, certify that	I was a student at the following
Student's Name (please school(s) as note		•	_
School:		School:	
From:	Year / Month / Day	From:	Year / Month / Day
To:	Year / Month / Day	_	Year / Month / Day
Grade(s)	Year / Month / Day		Year / Month / Day
School:		School:	
From:	Year / Month / Day	From:	Year / Month / Day
То:	Year / Month / Day	То:	Year / Month / Day
Grade(s)	:	Grade(s)	· :
Student's Signature			Counsellor's or Counsellor's Secretary's Name
(School Sea	l or Stamp)	Co	ounsellor's or Counsellor's Secretary's Signature
			Name of Schoo