Form Confirmation of Investigation by Ministry of Social Services or Police Services



Saskatchewan Distance Learning Centre (Sask DLC)

Main Office:
Box 370, Kenaston, SK SOG 2N0
Phone: 306-252-1000
www.saskDLC.ca

Reference Protective Services Adopted March 4, 2024 Level Local Campus Submit to Superintendent of Student Suppor	
Reference	Protective Services
Adopted	March 4, 2024
Level	Local Campus
Submit to	Superintendent of Student Support
When	As Required

As an authorized investigating official, I will be investigating the following student(s).

School Name	To be Completed by School Principal	
Student Name	Birth Date (mm/dd/yyyy)	Grade
Student Name		
Agency Name	Telephone	
Worker's Name (please print)		
Worker's Signature	Date	
Agency Name	Telephone	
Worker's Name (please print)		
Norker's Signature	Date	
ion Plan (Please check applicable below):		
Investigation is ongoing. Student(s) will return home. F	Parents will be contacted as soon as possib	ole.
Student(s) has been apprehended.		
Student(s) will be returning to school.		
Outcome unknown. Information to follow		
Follow-up contact will be made with the principal/design	ate.	
Other important conditions or information (i.e. Effects of children by other individuals, etc.).	investigation on other children in the home	e, access to
Principal's Signature	 Date	