



SWIS Referral Form

The Settlement Worker in School program provides newcomer families with information and support on:

- Education in Canada
- Community Programs
- Health
- Other Settlement Needs

I give permission for a Settlement Worker to contact me:

Name of Parent/Guardian

Phone Number

Name of Student

Name of School

Email Address

Language Spoken at Home

I _____, hereby consent to be contacted by the YMCA Settlement Service Provider and give consent to the School Board to forward this form. I also give consent for the YMCA and the School Board to exchange and disclose my information internally.

Signature of Parent/Guardian or Student 12 years and older
(We will contact Parent(s)/Guardian(s) of any student under the age of 16 requesting services*)

Date

Please forward referral forms to the contact below:

Fatme El Sabbagh

SWIS - Program Coordinator

705-791-6378

fatme.elsabbagh@sm.ymca.ca or swis@sm.ymca.ca

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