



PATH PARENT CONTRIBUTION EXEMPTION

For School Year 2020/2021

This verifies that _____ parent of
_____ in Grade _____ is approved for PATH benefits

and therefore exempted from Parent Contribution as mandated by the Government of Jamaica.

PATH #: _____ Current Expired

Parent: Will not Pay Voluntarily Paid \$ _____

Parent's Signature: _____ Date: _____

Verified by School: _____ Date: _____
