**Duplicate Student Record Deletion FORM**

1. Attach this completed form **(in Word document format**) to a Service Desk ticket [GVSD Help Desk](https://webhelpdesk.sd61.bc.ca/). We **cannot** process scanned PDFs.
2. Please Include the Ministry of Education- Data Management Report. This is the report that is emailed to you alerting you of the duplicate.

**Student record to be RETAINED in MyEd BC (This is the student record with the PEN)**

Pupil Number (**MyEd BC** Student ID)      

Legal Last Name

Usual Last Name

Legal First Name

Preferred First Name

Gender

Birth Date

PEN

**Duplicate Student record to be DELETED (This is the student record with NO PEN. Do not enter anything in the PEN field below as the PEN is missing)**

Pupil Number (**MyEd BC** Student ID)

Legal Last Name

Usual Last Name

Legal First Name

Preferred First Name

Gender

Birth Date

PEN (if there is one)