

APPLICATION FOR ADMISSION		Location:	
English as an Additional Language			
Preferred Time: <input type="checkbox"/> Days (9am - 12pm) <input type="checkbox"/> Evenings (6pm - 9pm)		Preferred Delivery: <input type="checkbox"/> In person <input type="checkbox"/> Online (limited options)	
PLEASE PRINT CLEARLY			
PERSONAL INFORMATION	First Name:	Last Name:	Preferred Name:
	Address: (Mailing)		City/Province:
	Email Address:		Postal Code:
	Date of Birth: (mm/dd/yyyy)	Date of Arrival: (In Canada)	Cellular Telephone:
	1st Language:	Home Telephone:	
	Country of Birth:		
Marital Status: <input type="checkbox"/> Married (or equivalent) <input type="checkbox"/> Single <input type="checkbox"/> Prefer not to report	# of Dependents (children):	Gender: Pronouns: <input type="checkbox"/> Male _____ <input type="checkbox"/> Female _____ <input type="checkbox"/> Other _____ <input type="checkbox"/> Prefer not to report	Federal Language of choice: <input type="checkbox"/> English <input type="checkbox"/> French
Emergency Contact Name:		Emergency Contact Phone Number:	
<input type="checkbox"/> COPY OF GOVERNMENT DOCUMENTATION			
<input type="checkbox"/> Permanent Resident <input type="checkbox"/> Temporary Work Visa <input type="checkbox"/> Canadian Citizen <input type="checkbox"/> Refugee status at entry of Canada <input type="checkbox"/> Other _____ ID / UCI / ICU # _____			
PERSONS WITH DISABILITIES (Optional)			
If you are a person with a permanent disability, please check the box below. This allows you to access reasonable accommodations to assist with your studies. <input type="checkbox"/> I have a permanent disability. <input type="checkbox"/> I would like support services.			
1. Do you have children that require childcare/daycare? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, how many children do you have? _____ <input type="checkbox"/> If yes, what are the age(s) of the children? _____		4. Previous Education <input type="checkbox"/> Elementary <input type="checkbox"/> High School <input type="checkbox"/> College <input type="checkbox"/> University <input type="checkbox"/> Apprenticeship Certification of other non-university certificate/diploma/degree. <input type="checkbox"/> Other _____ Total Years? _____	
2. What is your primary objective for seeking language training at this time? <input type="checkbox"/> Find Employment <input type="checkbox"/> Pursue an Education <input type="checkbox"/> Participate in Canadian Society <input type="checkbox"/> Acquire Citizenship		5. Employment Status <input type="checkbox"/> Part-Time <input type="checkbox"/> Full-Time <input type="checkbox"/> Unemployed Current Employer? _____	
3. Previous English <input type="checkbox"/> None <input type="checkbox"/> In Canada: How Many Years? _____ <input type="checkbox"/> Before coming to Canada? How Many Years? _____		6. How did you hear about us? (Please check one) <input type="checkbox"/> Friend/Family <input type="checkbox"/> Radio <input type="checkbox"/> Newspaper <input type="checkbox"/> Work <input type="checkbox"/> Digital/Website <input type="checkbox"/> Library/Poster <input type="checkbox"/> Canadian Agency (e.g. BIRC) <input type="checkbox"/> Other? _____	
(Mandatory) Waiver: I hereby certify that all the information on this registration is true and complete. Further, I understand that this information is collected under the legal authority of the Regional College Act (1988) and the Local Authority Freedom of Information and Protection of Privacy Act. The information is used for administrative and statistical purposes by North West College and/or Ministries and Agencies of the Saskatchewan Government and the Government of Canada, including the issuance of the Saskatchewan Graduate Tax Credit. If you have any questions about the collection or use of this information, please contact the Privacy Head at North West College.			
Applicant's Signature (MANDATORY)		Date	
_____ X _____			
(Optional) <input type="checkbox"/> Visible Minority: refers to whether a person belongs to a visible minority group. The Employment Equity Act defines visible minorities as "persons, other than Aboriginal peoples, who are non-Caucasian in race or non-white in colour". The visible minority population consists mainly of the following groups: South Asian, Chinese, Black, Filipino, Latin American, Arab, Southeast Asian, West Asian, Korean, Japanese.			
Permanent Residents / Refugee Status only (Translation available) : Consent for Future Research - By signing below, the client is agreeing to allow Citizenship and Immigration Canada (CIC) to contact him/her in the future regarding his/her settlement and language progress. The client's information will not be shared by any third party.			
Applicant's Signature (OPTIONAL)		Date	
_____ X _____			

