

Battlefords Campus Phone 306-937-5100 Fax: 306-445-1575

Meadow Lake Campus Phone 306-234-5100 Fax: 306-236-7630

APPLICATION FOR ADMISSION								
	Program/Course Name	Location		Start	date			
	Last Name	First and Midc	First and Middle Names		Other Names Used			
PERSONAL	Address		City/Province		Post	tal Code		
	Email Address	Cellular Telephone		Home Telephone				
	Date of Birth (DD-MMM-YYYY)	Male Female						
	Saskatchewan Health Number	Social Insurance Number						
	Emergency Contact – Name	Emergency Contact – Phone Number						
NO	Name of School	Highest grade completed/Diploma Year			Year			
EDUCATION								
EDI								
		-	•			•		
ש	Name of Sponsoring Agency.	Consent	to Release Inf	ormation:				
FUNDING	I understand that by signing this form, information may be released to the Sponsoring Agency.							
7	The following information is voluntary and	nd will on	ly be BAND	AFFILIATION				
0 ₽	used for statistical purposes:							
TAU TIU	[] Metis							
EDUCATION EQUITY	Image: Treaty/Registered(Status) Indian Image: Treaty/Registered(Status) Indin Image: Treaty Indi	Status bled						
	by certify that all the information I submit to th							
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.								
Applic	ant's Signature			Date				
	COLLEGE USE ONLY DATE	I	NITIALS	Status of Applicatio	n:			
Receipt #								

NORTH WEST COLLEGE

10702 Diefenbaker Drive North Battleford, SK S9A 4A8 Phone: 306-937-5100 Fax: 306-445-1575 nbregistration@northwestcollege.ca 720 5th Street West Meadow Lake, SK S9X 1T9 Phone: 306-234-5100 Fax: 306-236-7630 <u>mlregistration@northwestcollge.ca</u>

Enrollment Form										
	nd Disturba	nce (\$1	165)		H2S (\$165)	Fall Protection (\$170)	Confined Space (\$170)			
Name										
	SAFETY TRAINING -				DATES	TIME				
	□ 424709	GD	H2S	FP	C.Sp	Sept 4-7, 2018	8 am – 4pm			
	□ 424713	GD	H2S	FP	C.Sp	Oct 2-5, 2018	8am – 4pm			
NON-CREDIT TRAINING	□ 424718	GD	H2S	FP	C.Sp	Nov 6-9, 2018	8am – 4pm			
	□ 424722	GD	H2S	FP	C.Sp	Dec.4-7,2018	8am – 4pm			
	□ 424726	GD	H2S	FP	C.Sp	Jan. 8-11, 2019	8am – 4pm			
	□ 424730	GD	H2S	FP	C.Sp	Feb 5-8, 2019	8am – 4pm			
TIC	□ 424734	GD	H2S	FP	C.Sp	March 5-8, 2019	8am – 4pm			
REI	□ 424738	GD	H2S	FP	C.Sp	April 2-5, 2019	8am – 4pm			
N-C	□ 424742	GD	H2S	FP	C.Sp	April 30 – May 3, 2019	8am – 4pm			
NO	□ 424746	GD H	H2S	FP	C.Sp	June 4-7, 2019	8am – 4 pm			
	Refund Policy: Eligible for full refund, 3 day notice required. Please see below									
	Refund Policy Guidelines: **3 DAYS NOTICE required for full refund** (see details below) Cancelling from a course three or more days prior to the class commencing will receive a full refund									
	Cancelling from a course within three days of the class commencing will receive a full refund less \$25 Cancelling from a course after the start date but prior to one-third of the scheduled hours delivered will receive a refund of ½ of the course fees. Non-attendance is not considered a cancellation. Sponsors will be invoiced accordingly.									
ing	Parking Policy:									
Parking	Student attending classes between 8 am – 5 pm must park either the north or south student parking lots. NO PARKING ALLOWED IN VISITOR PARKING LOT.									
Other	Tobacco Policy:									
	Smoking, or other tobacco use, is not permitted anywhere on campus including the grounds and parking									
	lots.									
ō	Location:									
	Room 136									