

Office Use Only

SIN
Birth Certificate
IMM 1000
Permanent Resident
Other

Section C - Address

Street _____ Number _____ Apt./Unit _____ City _____ Province _____
Postal Code _____ Country _____
Home Phone _____ Other Phone _____
E-mail _____

Section D – Academic History

Applicants, including those for re-admission, should list each academic institution, secondary and post-secondary, attended or currently being attended. Attach a separate sheet if more space is required.

From Year/Month	To Year/Month	Academic Institution and Location (City, Province, Country)	Year/ Level	Program	Diploma/ Degree Granted

Section E – Work/Life Experience

Answer the following questions. Include a résumé, if possible.

1) Please tell us about your experiences of school, such as high school, college, or other courses or programs you've taken. When did you last go to school?

2) Please list your preferred activities or areas of significant interest. (These could include leadership or participation in organizations or projects, athletics, travel, community, social activities, drama, music, personal hobbies and/or volunteer work.) Provide a brief description and dates if relevant.

3) Please tell us about barriers that you have faced in trying to access university, college, or other post-secondary education.

4) Please list your most significant part-time or full-time employment in the past five years, beginning with the most recent.

5) List the personal accomplishments that you are most proud of.

6) How did you hear of this course? _____

Section F – Certification of Information – Must be completed by applicants

I declare that all statements are correct and complete, including my declaration of citizenship and status in Canada. **I have also fully disclosed my attendance at academic institutions to date.** I understand that I may have to provide documentation at some future date to substantiate my claim and that **any misrepresentation of this information may result in the cancellation of my admission or registration status.**

Signature _____

Date _____