CONTINUING STUDIES AT ASSINIBOINE

Registration Form

Assiniboine College
CONTINUING STUDIES

Please type or print clearly

Student Number

(If you have previously attended Assiniboine) _____

Location

☐ Brandon ☐ Dauphin ☐ Other _____

Course Name	Course Number	Location	Start Date	Time	Fee*

**Please include 5% GST, if applicable (refer to course descriptions)*

Personal Information *(* Required)*

Use your full, legal name. Your name will appear on your certificate/diploma/transcript as indicated below:

Last Name* _____ First Name* _____ Middle Name _____

Preferred First Name _____ Previous Last Name *(if applicable)* _____

Canadian Social Insurance Number* _____ _____ _____ Date of Birth* _____ _____ _____ *(YYYY/MM/DD)* Gender ☐ Female ☐ Male ☐ Unspecified

Permanent Home Address*

Street address (or PO/Box #)* _____

City or Town* _____ Province* _____ Postal Code* _____ Country* _____

Telephone: Home* _____ Mobile _____ Other _____

Email* _____

Mailing Address *(if different from above)*:*

Street address (or PO/Box #) _____

City or Town _____ Province _____ Postal Code _____ Country _____

Do you require services for a disability or medical need that may have physical, mental, intellectual, or sensory impairments, which may be permanent or temporary? ☐ Yes ☐ No

Do you wish to specify that you are a visible minority?
(Persons in a visible minority group in Canada are defined as those who are not Caucasian or Indigenous) ☐ Yes ☐ No

Do you identify as an Indigenous person? If yes, please specify: ☐ Status ☐ Non-Status ☐ Métis ☐ Inuit ☐ N/A

Has anyone in your family (parents, grandparents) attended college or university? ☐ Yes ☐ No

Are you a current or past member of the Canadian Armed Forces? ☐ Yes ☐ No

Emergency or Alternate Contact

Last Name _____ First Name _____

Email _____ Telephone _____

Citizenship

☐ Citizen ☐ Permanent Resident ☐ Refugee Claimant ☐ Other _____

Study permit students please use the international student application guide. Permanent residents must submit a copy of the PR card with application.

Primary Language

All applicants educated outside of (English-speaking) Canada or a country not on the English test-exempt list are also expected to meet the English language proficiency requirement. See **assiniboine.net/elp** for more information.

What is your first language (language first spoken and still understood)? _____

Sponsorship

Note: This form must be signed by an authorized company/agency representative. Receipts will be issued in the company/agency name. Refunds will be issued to the company/agency, in the event of cancellation of the course. For information about textbooks, please call the Assiniboine bookstore at 204.725.8721.

Student Name _____

Please invoice the following company/agency:

Company/Agency _____

Mailing Address:* PO or Box Number and Street _____

City or Town _____ Province _____ Postal Code _____ Country _____

Telephone: Home* _____ Mobile _____ Fax _____

Email* _____

Name of Agency Contact _____ Title _____

Authorized Signature _____

Declaration

- I declare that I have read and understood the information in Assiniboine's application and guide;
- I declare that all statements made with respect to this application are true and complete;
- I understand that misrepresentation, falsification of documents, or the withholding of requested information with respect to this application can result in cancellation of admission or registration, and can include permanent expulsion from the college, and further, that information on falsified documents may be shared with the Association of Registrars of the Universities and Colleges of Canada;
- I authorize my high school/college/university to release my academic record(s) for admission purposes should the need arise;
- I declare that I have read and understood the information in the Privacy Statement For Applicants And Students, located at **assiniboine.net/privacy**. By submitting your application, you confirm that you consent to the collection and use of your personal information as set out in that statement;
- I agree, if admitted, to comply with the regulations of Assiniboine College. General student policies are located at **assiniboine.net/policie**s. Additional program-specific regulations apply.

By submitting your application to Assiniboine College, you confirm the above declarations.

For all college policies, including adding/dropping courses and refunds, please refer to **assiniboine.net/policies**.

Your signature or electronic confirmation certifies that you are authorized to submit this registration, and agree to Assiniboine College's terms and conditions.

Signature _____ Date _____

or

☐ By checking this box, I am electronically agreeing.

Name _____ Date _____

Method of Payment

Please choose one method of payment:

☐ Cheque/Money Order (payable to Assiniboine College) ☐ Visa ☐ Mastercard ☐ Cash ☐ Debit *(Please pay cash or debit in person)*

Credit Card # _____ _____ _____ _____ Expiry Date _____

Cardholder Name _____

Cardholder Signature _____ Cardholder Phone Number _____

Declaration of Waiver

The college does its best to update program information regularly so applicants are not inconvenienced. However, on occasion, changes do occur. The college reserves the right to modify or cancel a program, option, course, program objective, articulation agreement, fee, timetable, or campus location without notice or prejudice. Please visit our website assiniboine.net for complete and up-to-date program information.

How to Register

1. Save your completed form and submit it electronically as an email attachment to **registration@assiniboine.net**.
2. Print and drop-off this completed form in-person at Assiniboine's Registrar's Office, located at Assiniboine's Victoria Avenue East campus in Brandon, Manitoba (1430 Victoria Avenue E.)