

Skills & Safety Training Registration Information

Please print clearly.

Course Name: _____

Course Date: _____

Last name

First name

Middle name

Previous (maiden) name

Mailing address

City/Town

Postal code

Province

Email *By providing your email address, you are consenting to receive information electronically from Great Plains College.*

Gender: Male

Female

Other

Prefer not to disclose

Phone number

Birthdate

dd	mm	yy

Social Insurance Number

Great Plains College collects your SIN for the purpose of issuing tax receipts.

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If sponsored - company name: _____

DECLARATION OF PRIVACY (please check the box to indicate your agreement)

In accordance with applicable laws, Great Plains College collects, uses and discloses your personal information to carry out its operations and to provide services to you (for example, to provide you with academic programming and other related services) in accordance with its Privacy Policy (www.greatplainscollege.ca/about-us/policies). For more information about how we collect, use and disclose your personal information, please see our Privacy Policy or contact Great Plains College's Privacy Officer (by mail at: 129 2nd Ave NE, Swift Current, SK, S9H 2C6, or by email at: privacyofficer@greatplainscollege.ca).

I acknowledge that I have read Great Plains College's Privacy Policy and I consent to Great Plains College's collection, use and disclosure of my personal information, as outlined above.

DECLARATION OF CONSENT TO USE PERSONAL IMAGE AND INFORMATION

This form authorizes Great Plains College to use your personal image and limited personal information for marketing and promotional purposes related to the college. These may include, but are not limited to, brochures, newspaper and website advertising, television, radio and multimedia productions for Great Plains College. A personal image may include photographs and audio or video recordings. Personal information may include your testimonial, college program and location and year of graduation. This activity is conducted under the authority of the Regional Colleges Act 1988, which mandates the provision of adult education programs and services to the residents of Saskatchewan. Your personal image and information will be used in a manner consistent with the privacy provisions of the Freedom of Information and Protection of Privacy Act. To request your image and information not be used as outlined above, please phone the Communications Unit at 1 (866) 296-2472 extension 5475.

Please do not use my personal image for marketing and promotional purposes.

ACKNOWLEDGMENT (please check the box to indicate your agreement)

I hereby certify that all the information provided is true and complete. I understand that false information may result in the cancellation of my admission or status as a registered student and/or scholarship/award recipient. I agree to abide by Great Plains College rules and regulations, including payment of fees. I have read and understand the college's declaration of "Privacy" and "Consent to use my personal image and information."

Print name

Signature

(dd / mm / yyyy)