

LOCATION OF PROGRAM _____

APPLICANT START DATE _____

OFFICE USE ONLY

Overall language level (If known) _____

Date of assessment _____

Start date (dd / mm / yyyy) _____

Scores: Listening Speaking Reading Writing _____

PSE #: _____

☐ OCSM

☐ ICARE

OCSM #: _____

BASIC INFORMATION

First name _____

Middle name _____

Last name _____

Gender:

☐ Male

☐ Prefer not to disclose

☐ Female

☐ Other: _____

Maiden or previous name _____

Date of birth (dd / mm / yyyy) _____

Social Insurance Number- Great Plains College collects your SIN for the purpose of issuing tax receipts.

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

Street address _____

City/Town _____

Postal code _____

Mailing address (if different from above) _____

City/Town _____

Postal code _____

Home phone _____

Cell phone (if different) _____

The following information is voluntary:

Marital Status: ☐ Married ☐ Single ☐ Common-law ☐ Divorced ☐ Widowed ☐ Separated

Number of children (under 12 years of age) _____

CITIZENSHIP - MANDATORY INFORMATION REQUIRED

☐ Canadian citizen

☐ Permanent resident

☐ Temporary foreign worker

☐ Visitor permit

☐ Student permit

Other: _____

Arrival date in Canada (dd / mm / yyyy) _____

Arrival date in Saskatchewan (dd / mm / yyyy) _____

Visa expiry date (mm / yyyy) _____

Country of birth: _____ Nationality: _____ Language: _____

Client ID number _____

or

Citizenship number _____

Did you come to Canada as a refugee? If yes, what year?

OTHER INFORMATION

Number of years of schooling:

Number of years studying/learning English:

Highest level of education: ☐ Elementary ☐ High school diploma ☐ Post-secondary

Profession/job in home country: _____

Current profession/job: _____ Name of employer in Canada: _____

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

Date (dd / mm / yyyy)

CONSENT FOR FUTURE RESEARCH (OPTIONAL)

By signing below, the client is agreeing to allow Immigration, Refugees and Citizenship Canada (IRCC) 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 as a result of agreeing to this specific consent.

Applicant's signature (please sign in ink)

Application Date (dd/mm/yyyy)

EMERGENCY CONTACT

Name

Relationship

- -
Phone number