



To Teach To Guide To Learn

CONFIDENTIAL PERSONAL INFORMATION SHEET

Only to be used to determine the suitability for a specific program

Name: _____

Date: _____

Office Use Only			
Advisor	Funding	Start Dates	Interest

PERSONAL INFORMATION SHEET

Name: _____

Address: _____

City: _____ Province: _____

Postal: _____ Birth Date: _____

Phone (Home): _____ Phone (Work): _____

Phone (Cell): _____ Email: _____

Alternate Contact: _____ Phone: _____

Marital Status: Married Single Separated
 Divorced Widowed Other _____

Number of Children: _____

Are you currently on: EI Social Assistance Counsellor: _____Status in Canada:
 Citizen Landed Student Visa Visitor Visa Other _____How did you hear about Sprott-Shaw Community College?
 Newspaper Friend/relative Student Radio
 TV Yellow Pgs Internet Other _____**Notes**

Educational BackgroundIndicate last high school grade completed:
 Gr 9 Gr 10 Gr 11 Gr 12 Gr 13 GED
School name / location: _____Indicate post-secondary education completed:
 University College Trade School
School name / location: _____

Favourite subjects: _____

Hobbies: _____

Employment Background

Employer: _____ From: _____ to _____

Duties: _____

Employer: _____ From: _____ to _____

Duties: _____

What are your goals and objectives regarding your education at Sprott-Shaw Community College?

What Program(s) are you interested in?

What strengths do you have which you feel may help you during your program?

How long have you been considering career training? _____

What has prevented you from seeking career training sooner? _____

Can you think of anything that would prevent you from completing your program?

When are you available to start school? _____

Have you ever cashed a Canada Student Loan (mark no if fully repaid)? Yes No

If you mark yes, please talk to the advisor about Canada Schedule 2, BC Certificate 2, and Alberta Form B

Note: Admissions requirements cannot be waived by the College or the student

I hereby agree that Sprott~Shaw Community College may collect, use and disclose my personal information for the purposes of providing career counselling, educational funding and employment placement services to me, and to verify the accuracy of the information I have provided.

Applicant's Signature

Date

Witness

FOR OFFICE USE ONLY

Inquiry ID Number: _____

Program: _____

(age: _____) Mature Student
(Age 19 and one year out of school)

Grade 12/GED
(transcript in file)

Upgrading Required

Entrance Exam Results Language: _____ Mathematics: _____ Composite: _____

Composition Results Not Required Accepted Not Accepted

Prerequisites checked (Director checks that italicized items on Student File Checklist—which indicate prerequisites for this program—do match program outline and are in this student file before signing the enrolment contract)

Comments: _____

Recommended Not Recommended _____
Advisor's Signature *Date*

Approved Not Approved _____
Director's Signature *Date*

CONFIDENTIAL WHEN COMPLETED