Student Application/Registration Form

PART A - PROGRAM/C	OURSE INFORMATI	Student ID:									
PROGRAM Name:		Start Date (mm/dd/yyyy):									
<u>OR</u>											
COURSE Name:											
Course Code (optional):		Start Date	(mm/dd/yyyy	r):	Location:						
Other Program/Course Information:											
PART B – PERSONAL I	NFORMATION										
Last Name:		First Name:									
Middle Name:		Preferred Name:									
Other (Former) Name:											
Gender: Male	Female C	Gender Neu	tral Uı	ndeclared							
Date of Birth (mm/dd/yyy		Social Insurance Number:									
NOTE: NBCC cannot rel Social Insurance Number		and Enrolm	nent Certificat	e for eligible cou	rses/programs without a						
Have you taken other programs/courses/training with NBCC?: Yes No											
Residency and Citizens	ship Information										
Canadian Citizen	Permanent Resi	dent F	Refugee	Student Visa	Employment/Other Visa						
If NOT a Canadian citizen, indicate country of citizenship: (Proof of English language proficiency may be required.)											
Home Address:											
		Street/Rural Num	nber/Box Number		County (if NB Resident)						
City/Town	Province		Co	ountry	Postal Code						
Telephone Number (Indicate "c" if cell phone)	Primary:		Sec:		Other:						
Email Address	Primary:		Sec:		Other:						
Emergency Contact	Full Name:										
Tolonhono Number	Drimany:		Sec:		Other:						

PART C - EDUCATION

Secondary Education:	High School	ol GE	ĒD	Adult High	dult High School		schooled	Other				
Name of High School				Last Level Completed			Date Comple	eted - Month/Day				
Post-Secondary Education (Number of Years):												
Certification Type:	Certificate	Diploma	В	achelor	Other							

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