

*Please read carefully and complete all sections. Print clearly in ink.
Indicates required field.

What Program Are You Applying For?

If you are applying for more than one program, you will need to submit an additional application and application fee.

Program Name*	Program Code _____ - _____
Type of Program (if known)	
Program Location	
Academic Start Month and Year	

Complete Legal Name

First Name*	Last Name*
Middle Name(s)	Former Name(s)

Permanent Address

P.O. Box # or Street Mailing Address*		
Town/City*	Prov.*	Postal Code*
Primary Phone Number (xxx-xxx-xxxx)*		
Alternate Phone Number (xxx-xxx-xxxx)		
Email Address*		

Alternate Contact Information

This person will be contacted if we cannot reach you by way of your other contact information.

Contact Name
Contact Relationship
Contact Primary Phone Number (xxx-xxx-xxxx)
Contact Alternate Phone Number (xxx-xxx-xxxx)

Personal Information

Your personal information is required for identification and statistical purposes.

Gender*	Birthdate (yyyy-mm-dd)*
Social Insurance Number	Sask. Health Services Number

Citizenship & Residency

What is your citizenship status?* <input type="checkbox"/> Canadian Citizen <input type="checkbox"/> Landed Immigrant or Permanent Resident <input type="checkbox"/> Other
Are you a Saskatchewan resident?* <input type="checkbox"/> Yes <input type="checkbox"/> No

English Proficiency

Proof of English Proficiency is required for all applicants whose primary language is not English. If English is not your first language, you must submit your English Proficiency Documents to your nearest Carlton Trail College office.

Is English your first language?* <input type="checkbox"/> Yes <input type="checkbox"/> No
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Education

Final acceptance cannot be considered until your official transcript(s) is/are received. This includes transcripts from high school, ABE-Adult 12, GED, and post-secondary institutions.

If you are presently in high school, you must provide a preliminary statement of high school marks signed by a high school official to be considered for conditional acceptance.

If you have received your education in a country other than Canada, a Foreign Credential Assessment Fee will be charged to assess your transcripts.

To request an official copy of your Saskatchewan high school, ABE-Adult 12 or GED transcript(s) visit <http://www.saskatchewan.ca/residents/education-and-learning/credits-degrees-and-transcripts>.

For all other transcripts, contact the relevant educational institution.

	Name of School or Institution and Location	Highest Grade or Level Achieved	Last Attended (Month/Year) or Presently Attending
High School Education*			
Post-Secondary Education			

Disability & Learning Difficulties

Completing this section may allow you to access reasonable accommodations to assist you with your studies.

Do you consider yourself a person with a disability? (This includes physical, intellectual, mental, psychiatric, sensory or learning conditions.) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to answer
Do you think you have any learning difficulties that may require you to have additional assistance to be successful with your studies? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to answer

Aboriginal/Visible Minority Status

Completing this section is voluntary and is used for statistical and/or funding purposes.

Are you of Aboriginal ancestry? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to answer
If yes, please indicate your status: <input type="checkbox"/> First Nation (Treaty/Status Indian) <input type="checkbox"/> First Nation (Non-Status Indian) <input type="checkbox"/> Métis <input type="checkbox"/> Inuit
What is your Band affiliation?
Are you a visible minority? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to answer

Activity in Previous 12 Months

What best describes your activity in the 12 months prior to this application?*

<input type="checkbox"/> Working	<input type="checkbox"/> Full-time student in different Sask Polytech program
<input type="checkbox"/> Unemployed/Looking for work	<input type="checkbox"/> Full-time student in non-Sask Polytech certificate or diploma program
<input type="checkbox"/> Full-time student in high school	<input type="checkbox"/> Full-time student in a university program
<input type="checkbox"/> Full-time student in Adult Basic Education	<input type="checkbox"/> Full-time student in studies other than above
<input type="checkbox"/> Full-time student in same Sask Polytech program	<input type="checkbox"/> Other _____

Sponsoring Information

Will your participation in this program be sponsored or funded by an agency, Band or employer?

Yes No Not Sure

If yes, which agency, Band or employer be sponsoring or funding you?

Contact Name:	Contact Phone Number:
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Program Awareness

How did you become aware of this program or course?

<input type="checkbox"/> Program Guide/ Flyer	<input type="checkbox"/> Radio or TV	<input type="checkbox"/> School Presentation	<input type="checkbox"/> College Staff	<input type="checkbox"/> Other
<input type="checkbox"/> Website	<input type="checkbox"/> Social Media	<input type="checkbox"/> Email	<input type="checkbox"/> Friend/Relative	<input type="checkbox"/> Don't Remember
<input type="checkbox"/> Newspaper	<input type="checkbox"/> Career Fair/Tradeshow	<input type="checkbox"/> Letter or Postcard		

Would you like to receive promotional information about Carlton Trail College's programs and events via email?

Yes No

Authorization & Consents

The information on this form is collected under the legal authority of the Regional Colleges Act 1998 and the Local Authority Freedom of Information and Protection of Privacy Act (LAFOIP). The information is used for administrative and statistical purposes by Carlton Trail College and/or Ministries and agencies of the Saskatchewan Government and the Government of Canada. If you have any questions about the collection or use of this information, please contact the Carlton Trail College Privacy Officer at 1.800.667.2623.

Carlton Trail College reserves the right to revise or cancel programs and courses, revise policies and procedures, and alter tuition, fees and other charges as deemed necessary without notice.

By submitting this form, I hereby acknowledge, authorize and consent to the following:

I understand that my application to this post-secondary program is not complete until Carlton Trail College receives my transcripts, my non-refundable application fee and other necessary supporting documents.

I hereby give authorized personnel of Carlton Trail College permission to discuss my application to and progress within this program with the affiliated or brokering institution.

If I am being sponsored or funded by an agency, Band or employer to participate in this program, I hereby give authorized personnel of Carlton Trail College permission to disclose information about my performance and attendance within this program to the agency, Band or employer that is funding me.

I understand that if I have transcripts from another country, I will be assessed a Foreign Credential Assessment Fee.

I agree to abide by the rules and regulations of Carlton Trail College, including the payment of fees.

I hereby certify that all of the information provided is true and complete. I understand that false information may result in the cancellation of my status as a registered student.

Signature

Name of Applicant*	Signature*	Date of Application*
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Please Submit...

*A **Non-Refundable Application Fee** for each post-secondary program you are applying for.

*If you are presently in high school at the time of this application, a **Preliminary Statement of High School Marks** which is signed and sealed by a school official. Conditional admission may be considered on the basis of your preliminary marks.

*An **Official Transcript** of your final high school, ABE-Adult 12 or GED marks. To request a copy of your Saskatchewan transcripts, visit <http://www.saskatchewan.ca/residents/education-and-learning/credits-degrees-and-transcripts>.

*If you are not a Canadian citizen, your **Immigration Documents**.

*If English is not your first language, your **English Proficiency Documents**.

Final acceptance will be considered upon the receipt of all required documents and application fee. Conditional acceptance may be considered upon the receipt of your preliminary marks.

You may pay by phone (Visa or MasterCard) or by cheque (made out to Carlton Trail College.)

For more information or to pay by phone, call 1.800.667.2623. Please submit cheques and required documents to your nearest Carlton Trail College office or mail to:

Carlton Trail College
611-17th Street, PO Box 720
Humboldt, SK S0K 2A0

FOR OFFICE USE ONLY

Preliminary Transcript Received	Official Transcript Received	\$45 Application Fee Received	Receipt Number
English Proficiency Document Received	Foreign Credential Transcript Received	Foreign Credential Assessment Fee Received	Receipt Number
SK Learning ID/Standing	Eligibility Decision	Accepted	OCSM Entered

Notes:

HUMBOLDT (Head Office)

Carlton Trail College
Box 720 (611-17th Street)
HUMBOLDT, SK S0K 2A0

PH: 306.682.2623

WATROUS

Carlton Trail College
Box 459 (202A 6th Avenue East)
WATROUS, SK S0K 4T0

PH: 306.946.2094

WYNYARD

Carlton Trail College
Box 716 (400A Avenue D West)
WYNYARD, SK S0A 4T0

PH: 306.554.3767