

## Application for Registration: Environmental Water Monitoring Continuing Education & Contract Training

	WHAT IS YO	OUR PREFERE	RED INTAKE D	ATE:							
Have you previou	No	If YES,	Student Number (	if known)							
First Name			Last Name				Mi	ddle Name			
Former Last Nam	е			SIN			DOB YYYY		MM	DD	
Address					City/Town			P	rovince		
Postal Code		Em	ail					Phone			
EMERGENCY CONTACT											
Name							Phone				
GENDER IDENTITY											
Woman People whose current gender is woman. This includes cisgender and transgender people who are women.  WOULD YOU SAY YOU ARE Cisgender People whose sex assigned at birth is the same as their gender.  Man People whose current gender is man. This includes cisgender and transgender people who are men.  Transgender People whose sex assigned at birth is different from their gender.				Non-Binary Gender  People whose current gender is not exclusively a woman or man. This includes people who do not have one gender, have no gender, are gender fluid, or are Two-Spirit.  Prefer Not to Answer  People whose gender is not known at the time of data collection. It may or may not get updated at a later point in time.  Prefer Not to Answer  Prefer Not to Answer							
VOLUNTEER DISCLOSURE						CITIZENSHIP STATUS					
Aboriginal Status: Yes No						Canadian: Yes No					
If yes, check all that apply:						If NO, what is your country of origin:					
						Perma	nent Resident	Inter	national	Student	
First Nations	Metis I	nuit Sta	tus Non-	-Status		Work \	/isa		in Caregi	ver	
						Other:		Refu	gee		
application permits C statements or docum admission to a progra will be made until the those of the departm FREEDOM OF INF In submitting this app information collected registration, student	the information I hollege of the Rockie ents can result in the mor course, and the application fee anient and program in ORMATION ANI polication, I understate on this application support services, rethe College with an	ave submitted in a storequest and the cancellation of the cancella	n this application d/or confirm any of my admission subject to meetid documents have registered, and the Freedom of relations, adminitiations acknowledge the	of for admissive information or registrating programs we been surany chang  Y  n on this for Information of the College in the	ssion is true and co on necessary to si ition status. I unde m or course prere ibmitted. I agree t es which may be it orm is collected ur on and Protection f the Student Asso lege may send cor	rstand the control of	the best of my knowler y application for admis nat submission of this a nd space availability. N y the established rules ille I am a student at Co authority of the Collego y Act and will be used a tes and other purposes information about me	ssion. The subrapplication in I No decision on Island regulation of Isla	mission of a no way gua my eligibil ns of the C ockies.  Act. I undo for purpos ith the mai	any false arantees ity for admission college including erstand the es of admission, ndate of the	
			•		per the above		tion. true, accurate and	complete			
<b>NOTE</b> : The waiver be spot in the program.	-	-		-			into the program. This	-	NOT GUAF	RANTEE you a	
EMPLOYMENT W	AIVER										
I		mpletion of the					ring Program through panies for Environme				
Applicant's Sig	nature		(please time full o	name here in lieu of	signature)		Date				
Witness Signa	ture		(prease type full n	wife here in hed of	S.B. actore)		Date				