Enrolment Package

Seabird Adult Education

www.seabirdisland.ca

STUDENT INFORMATION

Student Last Name

Student First Name and Initial

Student Mailing Address (including Country)

Postal Code

Student Telephone Number

Student Alternative Telephone Number

Student Email Address

I prefer to be contacted by: Alternative Phone

I prefer to be contacted by: Male

Date of Birth (YYYY-MM-DD)

Do you identify as: Non-Aboriginal

Band Registered to

Status Number

Personal Education Number

BC Electronic Student Information System Number

EDUCATION BACKGROUND

Have you received your Dogwood Diploma or Adult Dogwood Diploma? No

Highest Grade Attained

Last School Attended and City

School Telephone Number

PROGRAM INFORMATION

Program applying to: Carpentry

☐ I have read and understand the program information regarding admission requirements, costs and fees, duration, start date, end date, credentials, delivery methods and I am aware that this program is only offered in English).

PAYMENT INFORMATION

After the Seabird Island Band has received your enrollment application, we will notify you of your enrolment status within 10 business days. At this time, you will be able to make payments (if applicable) to the Seabird Island Band online or in person at our office.

SPONSORSHIP INFORMATION

☐ Is your tuition being paid for by a First Nations Band or external agency? (if no, leave blank)

Sponsoring Organization

Sponsoring Organization Contact

Sponsoring Organization Contact's Title

Mailing Address (including Country)

Postal Code

Sponsor's Telephone Number

Sponsor's Fax Number

Is your Sponsor paying for:
(only select one)

☐ Full Tuition
☐ Partial Tuition
☐ Textbooks
☐ Supplies and Equipment
☐ Lab Fees
☐

I authorize Seabird Island Band to release information regarding my academic files to my sponsoring organization and its agents upon proper identification, pertaining to:

☐ Financial Aid
☐ Disciplinary Status
☐ Billing
☐ Academic Information (Grades, Attendance)

☐ I understand that this authorization is in effect from the start date of my program and will end one month after my program ends.

STUDENT DECLARATION

The information provided by me on this form is true and accurate and that I am 19 years of age or older.

(If you are under the age of 19 your parent or guardian must sign this application.)

Student's Signature

Parent / Guardian Signature

Date Signed

Date Signed

You can print and submit this application by fax:
Seabird Adult Education
C/o Seabird College
1-604-796-1124

Or bring it to the Seabird Island Band Office:
2895 Chowat Road
Agassiz, BC
V0M 1A0