

APPLICATION FOR ADMISSION



Office of the Registrar

10215 108 Street NW, Edmonton, Alberta, Canada T5J 1L6
 T 780.644.6000 | Toll-free 1.866.534.7218 | info@norquest.ca | www.norquest.ca

Non-Refundable Application Processing Fee

- \$95 Canadian Citizens and Permanent Residents
- \$150 International Students
(Study Permit/Other Visa)

FOR OFFICE USE ONLY		
STUDENT ID #	TODAY'S DATE	ENTERED BY

PROGRAM INTENTIONS: Visit www.norquest.ca for programs and admission requirements

Have you previously applied or attended NorQuest College? <input type="radio"/> Yes <input type="radio"/> No		
PROGRAM DESIRED	APPLYING TO BEGIN (Check one only) <input type="radio"/> Fall <input type="radio"/> Winter <input type="radio"/> Spring <input type="radio"/> Summer Sept-Dec Jan-Apr May-Aug July-Aug	YEAR
PROGRAM SPECIALIZATION (If applicable)	APPLYING TO ATTEND (Check one only) <input type="radio"/> Full-time <input type="radio"/> Part-time	INSTRUCTION METHOD (Not all available for all programs) <input type="radio"/> In-Person Instruction <input type="radio"/> Online Delivery <input type="radio"/> Hybrid Delivery <input type="radio"/> Workplace Instruction
LOCATION (Consult NorQuest website for program locations)		

PERSONAL DATA: Complete all spaces below. If not applicable to you, indicate "N/A"

LAST NAME / SURNAME (LEGAL)	FIRST NAME / GIVEN NAME (LEGAL)	MIDDLE NAME (LEGAL)
FORMER / MAIDEN NAME	COMMONLY USED FIRST NAME	BIRTHDATE YEAR MONTH DAY
GENDER <input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Other	ALBERTA STUDENT ID NUMBER (If known)	

Home Address

Mailing Address (if different from Home Address)

STREET ADDRESS			STREET ADDRESS		
APT. NO.	CITY / TOWN		APT. NO.	CITY / TOWN	
PROVINCE	POSTAL CODE	COUNTRY	PROVINCE	POSTAL CODE	COUNTRY
TELEPHONE - HOME ()	TELEPHONE - OTHER ()		EMERGENCY CONTACT - NAME		
EMAIL ADDRESS			EMERGENCY CONTACT - TELEPHONE ()		
CITIZENSHIP STATUS <input type="radio"/> Canadian Citizen <input type="radio"/> Permanent Resident <input type="radio"/> Study Permit <input type="radio"/> Other/Work Visa <input type="radio"/> Refugee Status	COUNTRY OF CITIZENSHIP (If not a Canadian Citizen)		COUNTRY OF RESIDENCE (Where you are living now)		
	DATE OF ENTRY TO CANADA (For Non-Canadian Citizens) YEAR MONTH DAY		FIRST LANGUAGE SPOKEN (and still understood)		

Students With Disabilities

I want to access learning supports because I have a disability or serious health concerns. I understand I will be contacted by a NorQuest College Student Support Specialist to discuss my needs.

Indigenous/Aboriginal Applicants

If you wish to declare that you are an Indigenous/Aboriginal person of Canada, specify: (See "Collection of Indigenous/Aboriginal Application Data" statement on reverse)

- Status Indian/First Nations Métis
- Non-Status Indian/First Nations Inuit

Turn over to complete form →

EDUCATION RECORD: Complete all spaces below. If not applicable to you, indicate "N/A"

LAST OR CURRENT SCHOOL ATTENDED	CITY	PROVINCE/COUNTRY
LAST YEAR ATTENDED (YYYY)	HIGH SCHOOL STATUS <input type="radio"/> Still Attending <input type="radio"/> Graduate <input type="radio"/> Incomplete	HIGHEST GRADE COMPLETED (Circle one only) 1 2 3 4 5 6 7 8 9 10 11 12
HIGHEST EDUCATIONAL INSTITUTION ATTENDED <input type="radio"/> Elementary/Junior High School <input type="radio"/> High School <input type="radio"/> College <input type="radio"/> University <input type="radio"/> Technical Institute <input type="radio"/> Trade/Vocational <input type="radio"/> Other		
HIGHEST EDUCATIONAL LEVEL ACHIEVED <input type="radio"/> Less than High School Diploma <input type="radio"/> High School Diploma <input type="radio"/> GED <input type="radio"/> Post-Secondary Certificate <input type="radio"/> Post-Secondary Diploma <input type="radio"/> Journeyman Trade Certificate <input type="radio"/> Bachelor's Degree <input type="radio"/> Master's Degree <input type="radio"/> Doctoral Degree		

Post-Secondary Institutions: List all that you have attended below

NAME OF INSTITUTION	PROGRAM OF STUDY	LOCATION (CITY/PROVINCE)	LAST YEAR ATTENDED	CREDENTIAL OBTAINED

WHAT INFLUENCED YOU TO APPLY? (Indicate one only)

<input type="radio"/> Website	<input type="radio"/> Info Night	<input type="radio"/> Current Student
<input type="radio"/> Radio	<input type="radio"/> Career Fair	<input type="radio"/> Counsellor
<input type="radio"/> Newspaper Ad	<input type="radio"/> Open House	<input type="radio"/> Other
<input type="radio"/> Friend/Relative	<input type="radio"/> Former Student	<input type="radio"/> High School Visit
<input type="radio"/> Social Media	<input type="radio"/> International Agent	<input type="radio"/> International Fair
<input type="radio"/> Community Agency Visit	<input type="radio"/> International Info Session	

APPLICANT CHECKLIST

Official High School Transcript

Proof of current enrolment (if applicable)

Official Transcripts from all previous Post-Secondary Institutions

Application Fee

Collection of Indigenous/Aboriginal Application Data

Alberta Advanced Education is collecting this information pursuant to section 33(c) of Alberta's *Freedom of Information and Protection of Privacy (FOIP) Act* as the information relates directly to and is necessary to meet its mandate and responsibilities to measure system effectiveness and develop policies, programs and services to improve Indigenous/Aboriginal learner success.

For further information or if you have questions regarding the collection activity, please contact the Office of the Director, Research, Analysis and Data Collection, Advanced Learning and Community Partnerships Division, Alberta Advanced Education, 10155 102 Street, Edmonton, AB, T5J 4L5, 780.422.4322 or your institution's Registrar's Office.

Freedom of Information and Protection of Privacy (FOIP) Notification Statement

The personal information requested on this form is collected under the authority of section 65 of the *Post-Secondary Learning Act* and section 33(c) of Alberta's *Freedom of Information and Protection of Privacy (FOIP) Act* and will be used for the purpose of admission, registration, issuing income tax receipts, scholarships and awards, convocation, sending education information, library services, emergency notification, and for college research and planning. Certain personal information will also be disclosed to Statistics Canada to comply with the *Statistics Act*; Alberta Advanced Education to meet reporting requirements; Alberta Human Services for determining and monitoring student eligibility for their services; work experience and practicum sites to set up appropriate placements; Students' Association for the purpose of membership, fee collection, and contacting students; and to the Alumni Association for the purposes of membership and information sharing. For information about the collection and use of this information, contact the Office of the Registrar at 10215 108 Street NW, Edmonton, AB, T5J 1L6, Tel. 780.644.6000.

DECLARATION OF APPLICANT

I acknowledge the FOIP statement above, and verify that all information contained on this form is true and complete and that no relevant information has been withheld and that if I have misrepresented myself in any way my application for admission may be denied. I agree, if admitted to NorQuest College, to comply with the policies, rules and regulations of the college, or I may be withdrawn. I understand that the information that I have provided will be used in compliance with the FOIP legislation. If admitted to a collaborative program, I will abide by the rules and regulations of the collaborating institution. I also authorize NorQuest College to exchange my records with collaborating institutions.

I recognize that NorQuest College reserves the right to refuse admission or cancel any admission ruling.

SIGNATURE OF APPLICANT	DATE (yyyy/mm/dd)
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