



CONTINUING EDUCATION/EXTENSION COURSE REGISTRATION FORM

For the fastest, easiest method, register online at saskpolytech.ca > Programs & Courses > Continuing Education > Register for a Course

**SASKATCHEWAN POLYTECHNIC
Moose Jaw Campus**
Continuing Education Registration
Saskatchewan St and 6th Ave NW
PO Box 1420
Moose Jaw SK S6H 4R4
Fax 306-691-8578
RegInbox.MooseJaw@saskpolytech.ca

**SASKATCHEWAN POLYTECHNIC
Prince Albert Campus,
Technical Building**
Continuing Education Registration
1100 15th St E
Prince Albert SK S6V 7S4
Fax 306-765-1838
RegInbox.PrinceAlbert@saskpolytech.ca

**SASKATCHEWAN POLYTECHNIC
Regina Campus**
Continuing Education Registration
4500 Wascana Pky
PO Box 556
Regina SK S4P 3A3
Fax 306-775-7760
RegInbox.Regina@saskpolytech.ca

**SASKATCHEWAN POLYTECHNIC
Saskatoon Campus, Idylwyld Dr.**
Continuing Education Registration
1130 Idylwyld Dr N
PO Box 1520
Saskatoon SK S7K 3R5
Fax 306-659-4067
RegInbox.Saskatoon@saskpolytech.ca

For courses starting in July or August, registration opens Monday, April 3, 2017, for courses available for registration.

For all courses starting on or after September 1, registration opens Thursday, June 1, 2017. Check for availability over time.

Registrations are accepted on a first-come, first-served basis provided that the form is complete and the full fee is submitted. Registrations may not be processed unless all information is provided. Registration forms received by mail may be processed on the next business day. You may register and pay by any of the following methods; online (using credit or debit), by phone (using credit), by mail (with a cheque or money order payable to Saskatchewan Polytechnic), or in person (using credit, debit, cheque, money order or cash).

PERSONAL INFORMATION (PLEASE PRINT)

Surname (last name)		First Name	Middle Name(s)
Former Name(s) (if applicable)		Saskatchewan Polytechnic ID No. (If this is your first registration at Saskatchewan Polytechnic, a number will be assigned.) 000	
Address <input type="radio"/> This is my permanent address <input type="radio"/> current address (while attending Saskatchewan Polytechnic)			Town/City
Province	Postal Code	<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> I prefer to identify as _____	Birthdate (e.g., 03-Dec-1996)
Telephone (Home) (Area code required)		Telephone (Business) (Area code required)	Telephone (Cell) (Area code required)
Social Insurance Number (SIN) SIN may be required for tax exemptions and income tax receipts		Email (Your personal email address is used only as needed. We communicate with you mainly through your mySaskPolytech account.)	
Citizenship <input type="radio"/> Canadian <input type="radio"/> Permanent Resident (LI) <input type="radio"/> International Student (SV) Country of Citizenship _____			

VOLUNTARY INFORMATION

This information is requested for statistical purposes only. Check the area(s) that apply to you.

I have a permanent disability and may need accommodations to assist me with my studies. **Note:** Please book an appointment with a Saskatchewan Polytechnic disability services counsellor to discuss documentation of your disability; accommodations for your studies will be addressed at this appointment.

I am a member of a visible minority. (4)

I am of Aboriginal ancestry (check one) Métis (1) Status/Treaty Indian (3) Non-Status Indian (2) Inuit (5)

COURSE INFORMATION (PLEASE PRINT) Proof of pre-requisites must be provided with your registration

Course # (CRN)	Course Code and/or Name	Course Location (if applicable)	Start Date	Course Cost

DECLARATION

Consent to Use and Disclose Personal Information: In accordance with *The Saskatchewan Polytechnic Act* ("the Act") and *The Local Authority Freedom of Information and Protection of Privacy Act* ("LAFPIP"), Saskatchewan Polytechnic collects, uses and discloses Personal Information to perform its duties under the Act; as permitted by LAFPIP; for administrative, marketing, financial and statistical purposes; academic programming; academic or other student counselling; taxation; determination of eligibility for benefits; development and alumni operations; providing access to services offered by Saskatchewan Polytechnic; external placements that occur as part of your program; and email communications relating to marketing or promotion, market research, or user surveys about programs, services and products offered by Saskatchewan Polytechnic.

For further reference, see our Privacy Statement online (saskpolytech.ca) or contact Saskatchewan Polytechnic's Privacy Head (by mail at: 400-119 4th Ave S, Saskatoon SK S7K 5X2 or by email at: privacyhead@saskpolytech.ca).

Acknowledgment: In signing this form, I acknowledge my consent to Saskatchewan Polytechnic's collection, use and disclosure of my personal information, as outlined above.

I hereby certify that all the information on this form is true and complete. I understand that false information may result in cancellation of my admission or status as a registered student. I agree to abide by Saskatchewan Polytechnic rules and regulations, including payment of fees.

Signature _____ Date _____

Note: Payment or completed Confirmation of Sponsorship form must accompany this registration.

FOR OFFICE USE ONLY Date Payment Received: _____ Processed by: _____ Receipt #: _____
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Sponsored registrants must have the sponsoring agency or employer complete and sign our Continuing Education/Extension Confirmation of Sponsorship Form