



CONTINUING EDUCATION COURSE REGISTRATION FORM

STUDENT INFORMATION

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 This is my <input type="radio"/> permanent <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)*		Email (Your personal email address is required in order to communicate with you.)	
Citizenship <input type="radio"/> Canadian <input type="radio"/> Permanent Resident (LI) <input type="radio"/> International Student (SV) Country of Citizenship _____			

* Providing your SIN ensures you will receive your taxation benefits (if eligible).

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 racialized community or visible minority.

I am a Black Canadian

I am of Canadian Aboriginal ancestry (check one) Metis Status/Treaty Indian Non-Status Indian Inuit

I identify as 2SLGBTQIA

Employment Status (check one) Employed Full-Time Employed Part-Time Unemployed Self Employed

I am a newcomer (permanent resident) in Canada

COURSE INFORMATION

LEAD-118 Indigenous Business and Entrepreneurship

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* ("LAFOIP"), Saskatchewan Polytechnic collects, uses and discloses Personal Information to perform its duties under the Act; as permitted by LAFOIP; 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; to fulfill Saskatchewan Polytechnic's reporting obligations to federal and provincial governments; 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 #: _____
