



## ST CLAIR COLLEGE – APPLICATION FORM

### APPLICANT INFORMATION

First Name:		Last Name:		Previous Last Name:	
Title:	Mr. Mrs. Miss. Ms.	Gender:		Date of birth (MM/DD/YYYY):	
Current address:					
City:		Prov:		Postal Code:	
Home Phone:		Cell Phone:		SIN:	
Email Address:				Student ID# (if known):	

### CITIZENSHIP INFORMATION

Country of Citizenship:		Status in Canada:			
Has either of your parents/guardian attended a University/College? :					
Aboriginal Ancestry:		Country of Birth:		First Language:	

### HIGH SCHOOL - EDUCATION INFORMATION

Last High School Attended:		City & Province:			
OEN : _ _ _ - _ _ - _ _ _		Are you a High School Graduate: YES NO			
Attended High School From :		Attended High School To :			

### POST SECONDARY – EDUCATION INFORMATION

College or University Attended:					
City:		Attended From Date:		Attended To Date:	
Major or Program of Study:					
Credential Received:				Student Number:	
College or University Attended:					
City:		Attended From Date:		Attended To Date:	
Major or Program of Study:					
Credential Received:				Student Number:	

### SPONSORSHIP INFORMATION

Name of Sponsoring Agency:					
Contact Name:					
Phone:		E-mail:		Fax:	
File Number:				Case Number:	

### PROGRAM CHOICES

Program Code:		Campus		Level	
Program Name:				Start Date:	

### SIGNATURES

Signature of applicant:				Date:	
-------------------------	--	--	--	-------	--