

RED DEER COLLEGE 100 College Blvd., Box 5005 Red Deer, Alberta T4N 5H5 Telephone: 403.342.3400 Fax: 403.357.3660 E-mail: registrars@rdc.ab.ca Home Page: http://www.rdc.ab.ca

APPLICATION FOR ADMISSION

FOR OFFICE USE ONLY	NON-REFUNDA		
I.D. NUMBER		RECEIPT DATE	

In which term do you wish to begin attendance?	FALL (Sept. – Dec.)	SP
in mich term de yeu men te begin attendance.	WINTER (Jan. – April)	∏su

SPRING (May – June)

PREVIOUS APPLICATION

I have previously applied to Red Deer College	YES 🗌	NO 🗌	RDC ID #		
Non-refundable application fee enclosed 🛛 \$100 E	Domestic Student	t 🛛 \$200 International Student			
Method of payment: Apply on line at www.rdc.ab.ca/apply or pay in person at the Cashier Office with cash, cheque, money order,					

debit or credit card or mail in your application with a cheque to the address above.

PERSONAL INFORMATION (please print clearly AND enter your full legal name)

NAME								
LEGAL LAST NAME (SURN/	AME)	Red Deer College recognizes and welcomes the autonomy of individuals of all genders to be referred to in a way that reflects their identity. All						
LEGAL FIRST NAME (GIVEN	NAME)	applicants are welcome to signify the gender that they identify with.						
LEGAL MIDDLE NAME	Please check if you do not have a middle name.	GENDER Male Female Prefer not to identify						
PREFERRED FIRST NAME		BIRTHDATE (YYYY/MM/DD)						
LIST ALL FORMER NAMES	(if applicable, e.g., maiden name)							
		CITIZENSHIP FIRST LANGUAGE SPOKEN						
PERMANENT ADDRESS		FIRST LANGUAGE SPOKEN						
STREET, AVENUE, P.O. BO	XNUMBER	What is your status, per Citizenship and Immigration Canada rules						
CITY OR TOWN	PROVINCE							
CITI OK TOWN	FROVINCE	Canadian Citizen Refugee Student Permit Permanent Resident/Landed Immigrant						
POSTAL CODE	COUNTRY	If not Canadian – Date of entry to Canada (YYYY/MM)						
E-MAIL ADDRESS		Country of Citizenship						
HOME TELEPHONE	CELLPHONE							
MAILING ADDRESS (if di	fferent than above)	Declaring your Aboriginal heritage will assist in providing services, developing programs and offering events for Aboriginal learners.						
STREET, AVENUE, P.O. BO		Status Indian/ Non-Status Métis Indian/First Nations						
CITY OR TOWN	PROVINCE							
POSTAL CODE	COUNTRY	OTHER						
E-MAIL ADDRESS		ATHLETICS - Do you intend to try out for intercollegiate athletic competition?						
		YES NO If yes, which sport?						
HOME TELEPHONE CELLPHONE		MUSIC Do you intend to try out for a Music Ensemble?						
		(Symphonic Winds, Big Band, Choir, etc.)						
ALTERNATE CONTACT		YES NO If yes, which ensemble?						
LAST NAME	FIRST NAME	DISABILITIES						
HOME TELEPHONE CELLPHONE		If you have special needs related to a disability, would you like the Disability Services Coordinator to contact you?						
RELATIONSHIP TO APPLIC	ANT							

ACADEMIC INFORMATION

				ACAL								
LAST HIGH SCHOOL ATTENDED OR ATTENDING NOW NAME CITY F					PROVING	CE	COUN	TRY	Alberta Studer (if applicable)	nt Number - ASN	N	
ARE YOU ATT)								
_	S, what grad			When will	l vou fini	YYYY/I	MM			Will you or do school diploma	you have a high a?	
	.S, what yiat				r you iiii	511?		-				
NO If NO), last grade	comple	ted	When did	l you fini	sh?		_		∐ YES ∟	NO	
Last year of hi												
Please indicate		<u>vei(s)</u> %	SUBJECT	LEVEL	wents a	SUBJECT		VEL	%	SUBJECT	%.	%
		70			70				70		st levels of Math	
ART			DRAMA			PHYS. ED.				30-1, 30-2, Ap		
BIOLOGY			ENGLISH			PHYSICS				MATH		
CHEMISTRY			FRENCH (Or approved second language)			SCIENCE				MATH		
COMPUTER SCIENCE			MUSIC			SOCIAL STUDIES				MATH		
International Applicants Score: TOEFL IELTS CAEL MELAB PTE												
				POST S	ECON		CATIO	DN	Attach	list if more that	an two. Attach	ed 🗌
Name of Universi		echnica	I Institute	LOCA1 City / F			Last Attended Length of Certificate/Diploma Obtained or Year / Month Program Number of Years Completed			or		
(List MOST RECENT first) City / Province Year / Month Program Number of Years Completed												
PROGRAM CHOICE INFORMATION												
1 st Program Choice 2 nd Program Choice												
MAJOR (if applicable) MAJOR (if applicable)												
Image: Second state in the second s							npus					
If you do not gain admission to your program of choice, would you like to be considered for the Open Studies Program?												
Note: If you are accepted into your first program of choice, your application for your second choice will not be processed.												
Bachelor of Education Secondary and Music Diploma applicants MUST declare a major. Please see a full list of available majors at www.rdc.ab.ca/programs/academic-calendar												
Visiting Student (Specify: University/College – Letter of Permission required) :												
DECLARATION OF APPLICANT												
The personal information on this form is collected under the authority of the Post-secondary Learning Act of Alberta, the Freedom of Information and Protection of Privacy Act of Alberta (FOIP), the Statistics Act of Canada and the Income Tax Act of Canada. The information will be protected in compliance with FOIP used by the Office of the Registrar to determine your eligibility for admission and registration in programs; collecting transcripts; administering records, scholarships and awards; providing student services; and for alumni relations and fundraising. The personal information may be disclosed to academic and administrative units for College planning and research activities; federal and provincial agencies for reporting requirements; contracted or public health care providers, including collaborative educational, funding, and workplace agencies as required; and the Student's Association of Red Deer College through data sharing agreements. The information will be retained in accordance with approved Information Management guidelines. If you have any questions about the collection and use of this personal information, please contact the Registrar, Red Deer College, 100 College Blvd., Box 5005, Red Deer, Alberta, T4N 5H5, Telephone:403.342.3400.												

Declaration of aboriginal descent is self proclaimed. ALBERTA ADVANCED EDUCATION IS COLLECTING THIS PERSONAL INFORMATION PURSUANT TO SECTION 33(C) OF THE FOIP ACT AS THE INFORMATION RELATES DIRECTLY TO AND IS NECESSARY TO MEET ITS MANDATE AND RESPONSIBILITIES TO MEASURE SYSTEM EFFECTIVENESS OVER TIME AND DEVELOP POLICIES, PROGRAMS AND SERVICES TO IMPROVE ABORIGINAL LEARNER SUCCESS. For further information or if you have questions regarding the collection activity, please contact the Office of the Director, Research Accountability and Data Collection, Alberta Advanced Education, 10155-102 Street, Edmonton AB, T5J 4L5, (780) 422-4322. If you have any questions regarding the collection activity of the post-secondary institution, please contact the Registrar of Red Deer College.

I certify that the information provided is true and complete in all respects and that no information has been withheld. I understand that falsifying or omitting documents or information on this application will result in immediate and permanent dismissal from the College. Falsified documents may be referred to the appropriate authorities for prosecution of the applicant under the Criminal Code of Canada. The College reserves the right to refuse admission or cancel any admission ruling. I agree, if admitted, to comply with all College policies and understand my rights and responsibilities as a Red Deer College student. I agree, if admitted to Red Deer College, to comply with all rules and regulations of the College.

SIGNATURE OF APPLICANT	DATE OF APPLICATION