

RELATIONSHIP TO APPLICANT

RED DEER COLLEGE 100 College Blvd., Box 5005 Red Deer, Alberta T4N 5H5

APPLICATION FOR ADMISSION

	T4N 5H5 Telephone: 403.342.3400	FOR OFFICE USE ONLY	NON-REFUNDABLE APPLICATION FEE ENCLOSED						
	Fax: 403.357.3660 E-mail: registrars@rdc.ab.ca Home Page: http://www.rdc.ab.ca	I.D. NUMBER	RECEIPT DATE						
			Пастина						
In which term do you wish	ı to begin attendance?	☐FALL (Sept. – Dec.) ☐WINTER (Jan. – Ap	SPRING (May – June) SUMMER (July – Aug.)						
PREVIOUS APPLICATION									
I have previously applied to R	•	□ NO □	RDC ID #						
Non-refundable application fe	ee enclosed	ic Student	International Student						
	on line at www.rdc.ab.ca/apply your application with a cheque		e Cashier Office with cash, cheque, money order,						
	ONAL INFORMATION (plea	ase print clearly AN	D enter your full legal name)						
NAME	<u></u>								
LEGAL LAST NAME (SURNAME LEGAL FIRST NAME (GIVEN NA	•	of all genders	lege recognizes and welcomes the autonomy of individuals to be referred to in a way that reflects their identity. All welcome to signify the gender that they identify with.						
LEGAL FIRST NAIVIE (GIVEN IV)	AIVIE)								
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 a	pplicable, e.g., maiden name)								
PERMANENT ADDRESS		CITIZEN FIRST LANG	SHIP GUAGE SPOKEN						
STREET, AVENUE, P.O. BOX N	UMBER		507.5 <u>5</u> 07.51. <u>5</u>						
		What is you	r status, per Citizenship and Immigration Canada rules						
CITY OR TOWN	PROVINCE		☐ Canadian Citizen ☐ Refugee ☐ Student Permit ☐ Permanent Resident/Landed Immigrant						
POSTAL CODE	COUNTRY	If not Cana	If not Canadian – Date of entry to Canada (YYYY/MM)						
E-MAIL ADDRESS		Country of	Country of Citizenship						
PRIMARY PHONE NUMBER	SECONDARY PHONE NUMBE								
MAILING ADDRESS (if differ	ent than above)	Declaring yo	our Aboriginal heritage will assist in providing services, programs and offering events for Aboriginal learners.						
STREET, AVENUE, P.O. BOX N		Status I First Nations	I Metis I Inuit						
CITY OR TOWN	PROVINCE								
POSTAL CODE	COUNTRY	OTHER ATHLETICS	5 - Do you intend to try out for intercollegiate athletic						
E-MAIL ADDRESS		competition?	? NO If yes, which sport?						
PRIMARY PHONE NUMBER	SECONDARY PHONE NUMBE	Do you inter	nd to try out for a Music Ensemble?						
EMERGENCY CONTACT		(Symphonic	Winds, Big Band, Choir, etc.) NO If yes, which ensemble?						
LAST NAME	FIRST NAME		•						
PRIMARY PHONE NUMBER	SECONDARY PHONE NUMBE		special needs related to a disability, would you like the rvices Coordinator to contact you?						

SECONDARY EDUCATION (High School) Attach list if more than three. Attached							Alberta Student Number - ASN (if applicable)						
				Last Attended	ŀ	Highest		Are you currently attending?					
Name of Secondary School/High School (List MOST RECENT first)			LOCATION City / Province		Year / Month	,	Grade ttended	If yes, please indicate when you will complete (YY/MM)					
									YES NO) (/)		
										YES NC	•	<u> </u>	
										YES NO	•	,)	
Will you or do yo	ou have a hig	ıh schoo	ol diploma?	YES \square	NO					120 🗀 110	, (,		
Highest level of high school courses which you have completed or will complete prior to attending Red Deer College. Please indicate course level(s) and percentage(s). If courses are currently in progress please indicate INP in the % column.													
Please indicate SUBJECT	course leve	el(s) and	d percentage(s) SUBJECT	. If courses LEVEL	are cur	rently in progre SUBJECT		ease indic	cate IN %	P in the % colu	mn. LEVEL	%	
	LEVEL	/6	DRAMA	LEVEL	/0	PHYS. ED.	LC	VEL	/0		st levels of Mat		
ART			DRAINIA			PH13. ED.				30-1, 30-2, A	pplied, etc.	_	
BIOLOGY			ENGLISH			PHYSICS				MATH			
CHEMISTRY			FRENCH (Or approved second language)			SCIENCE				MATH			
COMPUTER SCIENCE			MUSIC			SOCIAL STUDIES				MATH			
English Langua		t Test:	TOEFL	ICI	TS		CAEL		N/I	L FLΔR	PTE		
(Please Enter Score)													
Name of Univers	sitv/College/1	Technica Technica	al Institute	LOCAT		Last Atten		ON Lengtl		n list if more th Certificate/Dip	an two. Attach Ioma Obtained		
(List MOST RECENT first)		City / Province		Year / Mo	Year / Month Prog				ars Completed				
PROGRAM CHOICE INFORMATION													
1 st Program Choice 2 nd Program Choice													
MAJOR (if applicable) MAJOR (if applicable)													
Full-Time	II-Time Part-Time Distance On Campus			☐ Full-T	ime Part-Time Distance On Camp					mpus			
If you do not gai	n admission	to your	program of choice	e, would you	ı like to l	be considered f	or the (Open Stud	dies Pro	ogram?	YES NO)	
Note: If you are	accepted int	o your f	irst program of c	hoice, your a	pplication	on for your seco	nd cho	oice will no	ot be pr	ocessed.			
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 Stu	ident (Specif	y: Unive	ersity/College – I	Letter of Perr	nission i	required) :							
				DECLA	RATIO	N OF APPL	ICAN	IT					
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 current and future 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	APPLICAN	Τ	SIGNATURE OF APPLICANT DATE OF APPLICATION										