

**SEVEN GENERATIONS EDUCATION INSTITUTE
APPLICATION FORM**

Application Type: Post Secondary Program Course Workshop Training Year: _____

Name of Program: _____ Are you applying for: Fall Winter Spring Summer

Applying As (please check one): High School Graduate GED Full-time program Campus: Fort Frances
 College Diploma Undergraduate Degree Mature Student Part-time program Kenora

PERSONAL INFORMATION (please print)

Title: Mr. Mrs. Ms. Miss

Last Name: _____ First Name: _____ Middle Initial: _____

Mailing Address: _____ Town/City: _____ Postal Code: _____

Residence Address (if different from above): _____

Home Phone Number: _____ Cell Phone Number: _____ Work Phone Number: _____ Fax Number: _____

Email: _____ Date of Birth(D/M/Y): _____ Gender: M F

SIN or SSN#: _____ Marital Status: Single Married Common Law # of depend. _____

Tribal/Linguistic/Cultural Affiliation: Status Indian Non-Status Indian Métis Inuit Non-Native
 Band/Tribe Name: _____ Treaty #: _____ Country of Citizenship: _____

Billing Information: Self Sponsor

Sponsor Name: _____

Mailing Address: _____ Town/City: _____

Province: _____ Postal Code: _____ Phone No. _____ Fax No. _____

Contact Name: _____ ** Sponsor letter to be submitted prior to registration

Sponsor has agreed to be billed for (please check applicable) Books Tuition

EDUCATION BACKGROUND (please complete, using additional paper if necessary)

Education Level	Institute Name(s) and Location(s)	Dates attended	Transcript Included	Name of Qualifications Granted
Secondary			Yes	Complete Incomplete
High School GED			No	
College			Yes	Complete Incomplete
Upgrading/Entrance Certificate Diploma Degree			No	
University			Yes	Complete Incomplete
Upgrading/Entrance Certificate Diploma Degree Graduate			No	
Other(please specify)			Yes No	Complete Incomplete

OFFICIAL TRANSCRIPT(S) of your academic record from each institution (secondary and/or postsecondary) must be forwarded to the Seven Generations Education Institute at the time of application.

I hereby certify that the information provided on this application is accurate and complete. I understand that incomplete, inaccurate or false statements may cause my admission or registration to be rescinded. I understand that admission requirements must be met before registration takes effect.

Signature of Student: _____ Date: _____

IMPORTANT: It is the student's responsibility to become familiar with the academic and financial regulations and penalty dates of Seven Generations Education Institute and partnering Institutes.

For Office Use only: Admission Decision: _____ **Comments:** _____