

Application for Program Admission

 Use this form to enroll into a program at the Faculty of Extension. Incomplete applications may not be processed.
Program fees are non-refundable

FOR OFFICE USE ONLY	
ID	PROGRAM

Personal Information

Legal First Name		Legal Middle Name		Legal Last Name		Former Name (if Applicable)		
Date of Birth (mm-dd-yyyy)		<input type="checkbox"/> Male <input type="checkbox"/> Female	Place of Birth (Country)		First Language		Country of Citizenship	
			Citizenship Status in Canada		<input type="checkbox"/> Canadian Citizen <input type="checkbox"/> Study Visa <input type="checkbox"/> Permanent Resident			

Correspondence Address (Mailing Address):	
City or Town	Province
Country	Postal Code
Telephone: <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Business	
Email Address*	

Canadian Aboriginal Applicants only:

The Aboriginal Student Services Centre (ASSC) offers services and cultural events that may be of interest to you. By declaring your status, you will help in the development of new services and events for Aboriginal students. For this purpose and in order to improve the assessment of the educational achievement of Aboriginal Learners, we ask you to declare if you are of Aboriginal ancestry within the meaning of the Canadian Constitution Act of 1982. Please note that some programs require proof of Aboriginal Status for admission purposes. Refer to §14.1 of the University of Alberta Calendar at www.registrar.ualberta.ca/calendar

Do you wish to declare that you are of Aboriginal ancestry within the meaning of the Canadian Constitution Act 1982?

Yes, please specify

I am Status Indian/First Nations I am Métis
 I am Non-status/First Nations I am Inuit

Education and Experience

 Please include your High School or most recent Post Secondary Transcript:
 Original Transcript is included with application, or Transcript has been ordered, date ordered: _____

Identification Numbers:	
Have you ever attended the University of Alberta or the Faculty of Extension?	Do you have an Alberta Student Number?
<input type="checkbox"/> No <input type="checkbox"/> Yes, student ID: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes, student ID: _____

Last Educational Institution Attended:	Program Name or Level Completed	Complete/Incomplete	Date Completed

Current or Most Recent Employer	Position	Number of Years

Your current position is:

Non-Supervisory First Line Supervisory Technical Management Upper Management Professional

How does the program you are applying to relate to your position?

Directly Related Indirectly Related Not Related

Program

Name of Program (Application fees are non-refundable)	Application Fee

Declaration and Student's Signature

 I hereby certify the information provided on this application for admission is true and complete in all respects. I also understand that any misrepresentation on my part may result in cancellation of my admission or registered status. I agree, if admitted to a Faculty of Extension program at the University of Alberta, to comply with the University regulations in the *University of Alberta Calendar*.

Date: _____ Signature: _____

Legal First and Last Name	FOR OFFICE USE ONLY	
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Payment Information

Enclose the **Non-Refundable Application Fee**. Payment can be made by Visa, MasterCard, American Express, Indent, Invoice (include LOA or PO), Cash, Cheque, Money Order (made payable to the University of Alberta).

I've included my Non-refundable payment of:

\$100 – for Faculty of Extension Citations and Certificates

CHECK PAYMENT METHOD:

- CASH
 MONEY ORDER**
 CHEQUE**
 HRDF
 INDENT _____
 INVOICE - If employer is to be invoiced, please include a Letter of Authorization (LOA) on company letterhead, or an authorized Purchase Order (PO) signed by signing authority (not student).
 CREDIT CARD:
 Attach CC Receipt
 Fax CC Receipt: _____

*Your personal e-mail address will be used to communicate to you until you are assigned a University of Alberta e-mail account. Subsequent communications will be sent to your U of A e-mail address. It is your responsibility to check your U of A email frequently.

**Make cheques or money orders payable to the University of Alberta

Name on Card:	
Credit Card Number	Expiry (mm-yy)
Cardholder Signature:	

FOR OFFICE USE ONLY:	RECEIPT #:

Checklist

- Application for Admission is completed in full and signed
- Transcript is included or has been ordered
- Read the declaration, sign and date your application
- Non-refundable Application Fee is included with application

Applications can be mailed to or dropped off at:

Faculty of Extension
 University of Alberta
 1-001-10230 Jasper Ave NW
 Edmonton AB T5J 4P6
 Canada