

# APPLICATION FOR ADMISSION



## Diploma of Education Program

2018-19       2019-20       2020-21

**Name:** \_\_\_\_\_  
Last    First    Middle

**Address:** \_\_\_\_\_  
Street    City

\_\_\_\_\_

Province      Postal Code      Home Phone Number      Cell Phone Number

**Email address:** \_\_\_\_\_

**Date of Birth:**      \_\_\_/\_\_\_/\_\_\_      **Gender:**       Male       Female  
MM DD YY

**Parent(s), Guardian(s), Spouse:**

\_\_\_\_\_

Full Name(s)    Relationship

\_\_\_\_\_

Address (if different from above)

\_\_\_\_\_

Home Phone Number    Cell Phone Number

**Church Membership/Congregation:** \_\_\_\_\_

**Accommodation:**       I would appreciate receiving assistance in arranging accommodation

Office use only	
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