

# APPLICATION FOR ADMISSION



## Diploma of Education Program

<input type="checkbox"/> 2022-2023	<input type="checkbox"/> 2023-2024	<input type="checkbox"/> 2024-2025
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**Name:** \_\_\_\_\_  
Last First Middle

**Address:** \_\_\_\_\_  
Street Number Street Name City

\_\_\_\_\_  
Province Postal Code Home Phone Number Cell Phone Number

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

**Date of Birth:** \_\_\_/\_\_\_/\_\_\_  
MM DD YY

**Gender:**  Male  Female

**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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