



RED DEER COLLEGE
 100 College Blvd.,
 Box 5005
 Red Deer, Alberta
 T4N 5H5
 Telephone: 403.342.3400
 Fax: 403.357.3660
 E-mail: registrars@rdc.ab.ca
 Home Page: http://www.rdc.ab.ca

APPLICATION FOR ADMISSION

School Within a College (SWAC)

2018-2019

PREVIOUS APPLICATION

I have previously applied to Red Deer College	YES <input type="checkbox"/>	NO <input type="checkbox"/>	RDC ID #

PERSONAL INFORMATION (please type or print clearly AND enter your full legal name)

NAME

LEGAL LAST NAME	
LEGAL FIRST NAME	
LEGAL MIDDLE NAME OR INITIAL	Please check if you do not have a middle name. <input type="checkbox"/>
PREFERRED FIRST NAME	
LIST ALL FORMER NAMES (if applicable, e.g., maiden name)	

CITIZENSHIP

FIRST LANGUAGE SPOKEN
What is your status, per Citizenship and Immigration Canada rules <input type="checkbox"/> Canadian Citizen <input type="checkbox"/> Refugee <input type="checkbox"/> Student Visa <input type="checkbox"/> Permanent Resident/Landed Immigrant <input type="checkbox"/> Other Visa
If not Canadian – Date of entry to Canada (YYYY/MM)
Country of Citizenship

PERMANENT ADDRESS

STREET, AVENUE, P.O. BOX NUMBER	
CITY OR TOWN	PROVINCE
POSTAL CODE	COUNTRY
E-MAIL ADDRESS	
HOME TELEPHONE	BUSINESS TELEPHONE

Declaring your Aboriginal heritage will assist in providing services, developing programs and offering events for Aboriginal learners. <input type="checkbox"/> Status Indian/First Nations <input type="checkbox"/> Non-Status Indian/First Nations <input type="checkbox"/> Métis <input type="checkbox"/> Inuit

GENDER	<input type="checkbox"/> Male	<input type="checkbox"/> Female
BIRTHDATE	<input type="text"/>	(YYYY/MM/DD)

MAILING ADDRESS (if different than above)

STREET, AVENUE, P.O. BOX NUMBER	
CITY OR TOWN	PROVINCE
POSTAL CODE	COUNTRY
E-MAIL ADDRESS	
HOME TELEPHONE	BUSINESS TELEPHONE

ALTERNATE CONTACT

LAST NAME	FIRST NAME
HOME TELEPHONE	BUSINESS TELEPHONE
RELATIONSHIP TO APPLICANT	

OTHER

DISABILITIES If you have needs related to a disability, would you like the Disability Services Coordinator to contact you? <input type="checkbox"/> YES <input type="checkbox"/> NO

ACADEMIC INFORMATION

LAST HIGH SCHOOL ATTENDED OR ATTENDING NOW NAME	CITY	PROVINCE	COUNTRY	Alberta Student Number - ASN (if applicable)
ARE YOU ATTENDING HIGH SCHOOL NOW? <input type="checkbox"/> YES If YES, what grade? _____ When will you finish? <u> </u> Y Y Y Y / M M <input type="checkbox"/> NO If NO, last grade completed _____ When did you finish? <u> </u>				Will you or do you have a high school diploma? <input type="checkbox"/> YES <input type="checkbox"/> NO

Last year of high school courses which you have completed or will complete prior to attending RED DEER COLLEGE. Please indicate course level(s).

SUBJECT	LEVEL	%	SUBJECT	LEVEL	%	SUBJECT	LEVEL	%	SUBJECT	LEVEL	%
ART			DRAMA			PHYS. ED.			List the highest levels of Math, e.g., 30-1, 30-2, Applied, etc.		
BIOLOGY			ENGLISH			PHYSICS			MATH		
CHEMISTRY			FRENCH (Or approved second language)			SCIENCE			MATH		
COMPUTER SCIENCE			MUSIC			SOCIAL STUDIES			MATH		

School Within A College (SWAC) Program 2017-2018 (Choose SWAC Program for which you are applying.)

Welding
 Automotive Service Technician (AST)

DECLARATION OF APPLICANT

***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 Registrar's Office to determine your eligibility for admission and registration in 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.*

***School District Access to Information.** RDC acknowledges that high school students in dual credit courses remain the sole responsibility of the school district for which they are enrolled for their high school studies ("School District") and therefore, the School District may obtain access to or custody of RDC records pertaining to the dual credit courses in which the high school student is registered at RDC. The School District will arrange to obtain written consent of the student over the age of 18 or of the parent or guardian of the students to participate in the programs under the Agreement signed by RDC and the School District and such consent must also allow the School District access to the students' records pertaining to the dual credit courses.*

***Declaration of aboriginal descent is self proclaimed.** ALBERTA ENTERPRISE AND 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, System Capacity and Development, Post-secondary Excellence Division, Alberta Advanced Education and Technology, 10155-102 Street, Edmonton AB, T5J 4L5, (780) 427-9635. If you have any questions regarding the collection activity of the post-secondary institution, please contact the Registrar of Red Deer College.*

SIGNATURE OF APPLICANT	DATE OF APPLICATION
SIGNATURE OF PARENT/GUARDIAN	DATE
SIGNATURE OF HIGH SCHOOL DUAL CREDIT CONTACT	DATE