

1301 - 16 Avenue NW Calgary, AB T2M 0L4

Email: corporate.training@sait.ca recreation@sait.ca

Please complete sections A to E & G.

A) Personal Information						
Alberta Student Number (If known)		Student ID number				
Last name		First Name			Middle Name	
Former Name(s)		Preferred First Name				
Birth Date (DD/MM/YY)		Gender Male Female				
Address		City			Province	
Preferred Number Home Cellula Busine	ar	r		Home Cellular Business	Postal Code	
Email					Primary Language	
If you wish to declare Aboriginal ancestry, please indicate	Citizenship Status					
First Nations Métis Inuit	Canadian	Permanent Resident	Refugee	Student Vi	isa Visitor Visa	Work Visa
Country of Citizenship		Date of Entry (DD/MM/YY)				
Emergency Contact Name		Emergency Contact Phone				
Company Name <i>(if applicable)</i>		Job Title <i>(if applicable)</i>				

B) Course Information

Course Name	Course Code	CRN (5 digit number)	Start Date	Course Fees	Total

• If you are taking this course as part of a continuing education certificate, please complete the Part-time Studies Program Declaration form.

• Fee Refunds: The fee refund policies are available on sait.ca, and may vary according to course or delivery method.

• Cancellation: SAIT reserves the right to cancel, postpone or combine classes, to limit course content, instructors, and dates or times. Registrants are notified of class changes by telephone, mail, or email before class start date.

FOIP

The personal information you provide on this form is collected under the authority of the Freedom of Information and Protection of Privacy Act of the Province of Alberta, Section 33(c). This information will be used to determine your eligibility for admission to a program or course of studies at SAIT, to facilitate your enrolment, to administer and evaluate Institute programs/courses, and for statistical purposes. It may be disclosed to Statistics Canada to comply with the Statistics Act (Canada), to Alberta Enterprise and Advanced Education for statistical, funding, planning, and research purposes, to the Students' Association of SAIT and the SAIT Alumni Association so that they can contact you for membership services. This information will also be maintained in a mailing list for direct marketing purposes, surveys or the distribution of other promotional material as approved by the Director of Office of the Registrar. Your personal information, contact the Office of the Registrar's FOIP coordinator at 403.284.8069.

Office Use Only - To be completed by Corporate Training or Recreation if individual payment is required.					
Contact Name					
Phone Er	imail				