

480 Madison Avenue, MB R3J 1J1
Tel: (204) 953-2800 Fax: (204) 953-2810

New student Returning student

| | | | | |
|--|---|---------------------|-------------|--|
| Program or Course | Aboriginal Financial Manager Diploma: Modular Format | | | |
| Name | LAST NAME | FIRST NAME | MIDDLE NAME | Preferred Start Date: |
| Mailing Address | P.O. BOX OR NUMBER & STREET | CITY OR TOWN | | YOUR MAIN ACTIVITY DURING THE LAST YEAR (Check ONE BOX) <input type="checkbox"/> Attending High School <input type="checkbox"/> Attending Community College <input type="checkbox"/> Other Education/ University <input type="checkbox"/> Employed <input type="checkbox"/> Not Employed <input type="checkbox"/> Other (please specify) |
| | PROVINCE | POSTAL CODE | COUNTRY | |
| Permanent Home Address <small>(If Different From Above)</small> | P.O. BOX OR NUMBER & STREET | CITY OR TOWN | COUNTRY | |
| | PROVINCE | BAND NAME & NUMBER: | | |
| E-mail | | | | |

PERSONAL

| | | | |
|--------------------------------|---------------|---------------------------|-----------------------------------|
| BIRTHDATE DAY MO YR | GENDER M F | HOME TELEPHONE NUMBER | WORK/MESSAGE TELEPHONE NUMBER |
|--------------------------------|---------------|---------------------------|-----------------------------------|

Privacy Statement

Personal information collected on this application form will be used by Yellowquill College for admission and registration. Your personal information is protected by the Manitoba Freedom of Information and Protection of Privacy Act. This information will be used to admit you to Yellowquill College, assign you your student number, register you in classes, report your grades and create your student file. It will also be used for accounting of registration, tuition and book deposit fees. Information about the names of our graduates and award winners may be publicized. If you have any questions about the collection and use of your personal information, please contact our Records Keeper.

EDUCATIONAL BACKGROUND

HIGH SCHOOL LAST ATTENDED

| | | |
|-------------------------------------|-------------------------------------|--------------------------------|
| NAME OF SCHOOL | | HIGHEST GRADE ACHIEVED |
| DATE LAST ATTENDED MO YR | NO. OF HIGH SCHOOL CREDITS ACHIEVED | PROV / STATE / FOREIGN COUNTRY |

HAVE YOU ATTENDED A MANITOBA COMMUNITY COLLEGE? YES NO

If YES, please complete the following:

| | |
|-------------------------------------|-----------------------|
| NAME OF COLLEGE | DEGREE(S) / CREDIT(S) |
| DATE LAST ATTENDED MO YR | PROGRAM / COURSE(S) |

HAVE YOU PARTICIPATED IN OTHER EDUCATION / UNIVERSITY? YES NO

If YES, please complete the following:

| | |
|-------------------------------------|-----------------------|
| NAME OF SCHOOL OR UNIVERSITY | DEGREE(S) / CREDIT(S) |
| DATE LAST ATTENDED MO YR | PROGRAM / COURSE(S) |

I certify with my signature that the above information is true and correct.

SIGNATURE: _____ DATE: _____

New Applicants Please Note:

1. An official transcript of your current educational standing (high school, adult basic education, college or university) should accompany this application.
2. All applications will be acknowledged by letter. If you have applied for a course that has special entrance procedures, details will be sent to you.
3. Please complete the following consent form if you wish to have us fax your acceptance letter directly to your funding agency:

| |
|---|
| Name of funding agency: _____ |
| Fax number: _____ |
| I consent to having Yellowquill College fax my acceptance letter to the above agency. |
| Signature: _____ |

AFMD Modular Applicants – Course Choices

Following are the courses offered in the modular program for 2022–2023. Please indicate with a check mark which of them you plan on attending.

Certificate (Level 1)

Intro Financial Acctg 1A _____

Communications _____

Intro Financial Acctg 1B _____

Diploma (Level 2)

Strategy & Decisions _____

Aboriginal History _____

Financial Reporting 1 _____