



# CONTINUING EDUCATION/EXTENSION COURSE REGISTRATION FORM

For the fastest, easiest method, register online at  
[saskpolytech.ca](http://saskpolytech.ca) > Programs & Courses > Part-Time Studies > Register for a Course

**SASKATCHEWAN POLYTECHNIC  
Moose Jaw Campus**  
 Continuing Education Registration  
 Saskatchewan St and 6th Ave NW  
 PO Box 1420  
 Moose Jaw SK S6H 4R4  
 Phone 306-691-8383  
 RegInbox.MooseJaw@saskpolytech.ca

**SASKATCHEWAN POLYTECHNIC  
Prince Albert Campus,  
Technical Building**  
 Continuing Education Registration  
 1100 15th St E  
 Prince Albert SK S6V 7S4  
 Phone 306-765-1600  
 RegInbox.PrinceAlbert@saskpolytech.ca

**SASKATCHEWAN POLYTECHNIC  
Regina Campus**  
 Continuing Education Registration  
 4500 Wascana Pky  
 PO Box 556  
 Regina SK S4P 3A3  
 Phone 306-775-7301  
 RegInbox.Regina@saskpolytech.ca

**SASKATCHEWAN POLYTECHNIC  
Saskatoon Campus, Idylwyld Dr.**  
 Continuing Education Registration  
 1130 Idylwyld Dr N  
 PO Box 1520  
 Saskatoon SK S7K 3R5  
 Phone 306-659-4800  
 RegInbox.Saskatoon@saskpolytech.ca

For courses starting in July or August, registration opens Monday, April 3, 2018, for courses available for registration.

For all courses starting on or after September 1, registration opens Thursday, June 1, 2018. Check for availability over time.

Registrations are accepted on a first-come, first-served basis provided that the form is complete and the full fee is submitted. Registrations may not be processed unless all information is provided. Registration forms received by mail may be processed on the next business day. You may register and pay using any of the following methods: online or by phone using Credit Card or Debit MasterCard/Visa; by mail using cheque or money order payable to Saskatchewan Polytechnic; or in person using any of the previously mentioned methods, or cash.

## PERSONAL INFORMATION (PLEASE PRINT)

|  |             |   |                                       |
|--|-------------|---|---------------------------------------|
| Surname (last name)  |             | First Name  | Middle Name(s)                        |
| Former Name(s) (if applicable)   |             | Saskatchewan Polytechnic ID No. (If this is your first registration at Saskatchewan Polytechnic, a number will be assigned.)<br>000 |                                       |
| Address <span style="float:right">This is my <input type="radio"/> permanent <input type="radio"/> current address (while attending Saskatchewan Polytechnic)</span>   |             |   | Town/City                             |
| Province   | Postal Code | <input type="radio"/> Male <input type="radio"/> Female<br><input type="radio"/> I prefer to identify as _____                      | Birthdate (e.g., 03-Dec-1996)         |
| Telephone (Home) (Area code required)  |             | Telephone (Business) (Area code required)   | Telephone (Cell) (Area code required) |
| Social Insurance Number (SIN) SIN may be required for tax exemptions and income tax receipts   |             | Email (Your personal email address is required in order to communicate with you.)   |                                       |
| Citizenship <input type="radio"/> Canadian <input type="radio"/> Permanent Resident (LI) <input type="radio"/> International Student (SV) Country of Citizenship _____ |             |   |                                       |

## VOLUNTARY INFORMATION

This information is requested for statistical purposes only. Check the area(s) that apply to you.

I have a permanent disability and may need accommodations to assist me with my studies. **Note:** Please book an appointment with a Saskatchewan Polytechnic disability services counsellor to discuss documentation of your disability; accommodations for your studies will be addressed at this appointment.

I am a member of a visible minority. (4)

I am of Canadian Aboriginal ancestry (check one)  Métis (1)  Status/Treaty Indian (3)  Non-Status Indian (2)  Inuit (5)

## COURSE INFORMATION (PLEASE PRINT) Proof of pre-requisites must be provided with your registration

| Course # (PIC) | Course Code and/or Name | Course Location (if applicable) | Start Date | Course Cost |
|----------------|-------------------------|---------------------------------|------------|-------------|
|                |                         |                                 |            |             |
|                |                         |                                 |            |             |
|                |                         |                                 |            |             |

## DECLARATION

**Consent to Use and Disclose Personal Information:** In accordance with *The Saskatchewan Polytechnic Act* ("the Act") and *The Local Authority Freedom of Information and Protection of Privacy Act* ("LAFOIP"), Saskatchewan Polytechnic collects, uses and discloses Personal Information to perform its duties under the Act; as permitted by LAFOIP; for administrative, marketing, financial and statistical purposes; academic programming; academic or other student counselling; taxation; determination of eligibility for benefits; development and alumni operations; providing access to services offered by Saskatchewan Polytechnic; external placements that occur as part of your program; and email communications relating to marketing or promotion, market research, or user surveys about programs, services and products offered by Saskatchewan Polytechnic.

For further reference, see our Privacy Statement online ([saskpolytech.ca](http://saskpolytech.ca)) or contact Saskatchewan Polytechnic's Privacy Head (by mail at: 400-119 4th Ave S, Saskatoon SK S7K 5X2 or by email at: [privacyhead@saskpolytech.ca](mailto:privacyhead@saskpolytech.ca)).

**Acknowledgment:** In signing this form, I acknowledge my consent to Saskatchewan Polytechnic's collection, use and disclosure of my personal information, as outlined above.

I hereby certify that all the information on this form is true and complete. I understand that false information may result in cancellation of my admission or status as a registered student. I agree to abide by Saskatchewan Polytechnic rules and regulations, including payment of fees.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Note: Payment or completed Confirmation of Sponsorship form must accompany this registration.**

|   |
|---|
| FOR OFFICE USE ONLY Date Payment Received: _____ Processed by: _____ Receipt #: _____ |
|---|