



ADULT AND CONTINUING EDUCATION - MASON EDUCATIONAL CENTRE

284 Cameron Avenue, Windsor, ON N9B 1Y6 | Ph: (519) 253-5006 - Fx: (519) 253-0053



Adult Application: Night School | February 2019

TREVLAC INFORMATION	ACTIVE	INACTIVE	NEW	ET	SCHOOL:
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OEN#	TREVLAC#
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Last Name	Address	Apt#
First Name	City	
Date of Birth YYYY / MM / DD	Postal Code	Gender (circle one) M F
Home Phone	Cell Phone	
Email Address		

EDUCATION INFORMATION

Name/Location of previous School:

Have you ever attended adult education? YES / NO If Yes Where:

Was your education done in another country? YES / NO If Yes Where:

Was your education done in another province? YES / NO If Yes Where:

CITIZENSHIP INFORMATION

What's your status in Canada? (Check one only)

Canadian Citizen 1 Permanent Res. or Landed Immigrant 3

Student Visa 4 In Canada on the authority of another Visa 5

Refugee Status 7

If you were NOT born in Canada, Please Answer Below

Country of birth	Country Entered From	Year/Month of Arrival
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If you were born in Canada but NOT in Ontario, Please Answer below

Province of birth	Province Entered From	Year/Month of Arrival
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What is your first language?

SOURCE DOCUMENTATION - To be verified by staff

Verified by: (Staff Signature)	<input type="checkbox"/> Canadian Citizenship 5	<input type="checkbox"/> Record of Landing 4
	<input type="checkbox"/> Cert. Birth Abroad 3	<input type="checkbox"/> Permit Come/ Remain 7
	<input type="checkbox"/> Indian Status 6	<input type="checkbox"/> Refugee Travel Doc. 9
<input type="checkbox"/> Birth Certificate 1	<input type="checkbox"/> Visa - Student 15	<input type="checkbox"/> Refugee ID 10
<input type="checkbox"/> Passport 8	<input type="checkbox"/> Visa - Other 16	<input type="checkbox"/> Name Change 13

MEDICAL INFORMATION	Payment
Do you have Medical Issues? (explain)	
Emergency Contact Name / Phone #	

