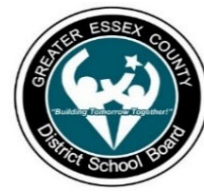




# ALTERNATIVE, ADULT & CONTINUING EDUCATION

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



## Application: Summer Learning Full Credit ESL | June 2020

<b>TREVLAC INFORMATION</b>	ACTIVE	INACTIVE	NEW	ET	<b>SCHOOL:</b>
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<b>OEN#</b>	<b>TREVLAC#</b>
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Last Name	Address	Apt#
First Name	City	
Date of Birth <small>yyyy / mm / dd</small>	Postal Code	Gender <small>(circle one)</small> <b>M F</b>
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?       Canadian Citizen 1       Permanent Res. or Landed Immigrant 3  
(Check one only)       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 - Please choose which ID you are able to provide

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"/> Visa - Student 15	<input type="checkbox"/> Refugee ID 10
<input type="checkbox"/> Birth Certificate 1	<input type="checkbox"/> Visa - Other 16	<input type="checkbox"/> Name Change 13
<input type="checkbox"/> Passport 8		

### MEDICAL INFORMATION

Do you have Medical Issues? (explain)

Emergency Contact Name / Phone #

