



RED DEER COLLEGE
 100 College Blvd.,
 Box 5005
 Red Deer, Alberta
 T4N 5H5
 Telephone: 403.342.3400
 Fax: 403.357.3660
 E-mail: registrars@rdc.ab.ca
 Website: http://www.rdc.ab.ca

APPLICATION FOR ADMISSION

In which term do you wish to begin attendance?	<input type="checkbox"/> FALL (Sept. – Dec.)	<input type="checkbox"/> SPRING (May – June)
	<input type="checkbox"/> WINTER (Jan. – April)	<input type="checkbox"/> SUMMER (July – Aug.)

PREVIOUS APPLICATION

I have previously applied to Red Deer College	YES <input type="checkbox"/>	NO <input type="checkbox"/>	RDC ID #
Non-refundable application fee enclosed <input type="checkbox"/> \$120 Domestic Student <input type="checkbox"/> \$200 International Student			
Method of payment: Apply online at www.rdc.ab.ca/apply or pay in person at the Cashier Office with cash, cheque, money order, debit or credit card or mail in your application with a cheque to the address above.			

PERSONAL INFORMATION (please print clearly AND enter your full legal name)

NAME

LEGAL LAST NAME (SURNAME)	
LEGAL FIRST NAME (GIVEN NAME)	
LEGAL MIDDLE NAME	Please check if you do not have a middle name. <input type="checkbox"/>
PREFERRED FIRST NAME	
LIST ALL FORMER NAMES (if applicable, e.g., maiden name)	

Red Deer College recognizes and welcomes the autonomy of individuals of all genders to be referred to in a way that reflects their identity. All applicants are welcome to signify the gender that they identify with.

GENDER	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Unspecified
BIRTHDATE	<input style="border: 1px dashed black;" type="text"/>		(YYYY/MM/DD)

PERMANENT ADDRESS

STREET, AVENUE, P.O. BOX NUMBER	
CITY OR TOWN	PROVINCE
POSTAL CODE	COUNTRY
E-MAIL ADDRESS	
PRIMARY PHONE NUMBER	SECONDARY PHONE NUMBER

CITIZENSHIP

FIRST LANGUAGE SPOKEN
What is your status, per Citizenship and Immigration Canada rules
<input type="checkbox"/> Canadian Citizen <input type="checkbox"/> Refugee <input type="checkbox"/> Student Permit
<input type="checkbox"/> Permanent Resident/Landed Immigrant
If not Canadian – Date of entry to Canada (YYYY/MM)
Country of Citizenship

MAILING ADDRESS (if different than above)

STREET, AVENUE, P.O. BOX NUMBER	
CITY OR TOWN	PROVINCE
POSTAL CODE	COUNTRY
E-MAIL ADDRESS	
PRIMARY PHONE NUMBER	SECONDARY PHONE NUMBER

INDIGENOUS DECLARATION

Declaring your Indigenous heritage will assist in providing services, developing programs and offering events for Indigenous learners.	
<input type="checkbox"/> Status Indian/First Nations	<input type="checkbox"/> Non-Status Indian/First Nations
<input type="checkbox"/> Métis	<input type="checkbox"/> Inuit <input type="checkbox"/> Not Applicable

EMERGENCY CONTACT

LAST NAME	FIRST NAME
PRIMARY PHONE NUMBER	SECONDARY PHONE NUMBER
RELATIONSHIP TO APPLICANT	

OTHER

RESIDENCE
Indicate any on-campus Residence options that you may be interested in:
<input type="checkbox"/> Single Residence <input type="checkbox"/> Barrier Free Residence
<input type="checkbox"/> Shared Residence <input type="checkbox"/> Family Residence
<input type="checkbox"/> None
DISABILITIES
If you have special needs related to a disability, would you like the Disability Resources Coordinator to contact you?
<input type="checkbox"/> YES <input type="checkbox"/> NO

Alberta Student Number - ASN
(if applicable)

SECONDARY EDUCATION (High School) Attach list if more than three. Attached

Name of Secondary School/High School (List MOST RECENT first)	LOCATION City / Province	Last Attended Year / Month	Highest Grade Attended	Are you currently attending? If yes, please indicate when you will complete (YY/MM)
				<input type="checkbox"/> YES <input type="checkbox"/> NO (/)
				<input type="checkbox"/> YES <input type="checkbox"/> NO (/)
				<input type="checkbox"/> YES <input type="checkbox"/> NO (/)

Will you or do you have a high school diploma? YES NO

**Highest level of high school courses which you have completed or will complete prior to attending Red Deer College.
Please indicate course level(s) and percentage(s). If courses are currently in progress please indicate INP in the % column.**

SUBJECT	LEVEL	%	SUBJECT	LEVEL	%	SUBJECT	LEVEL	%	SUBJECT	LEVEL	%
ART			DRAMA			PHYS. ED.			List the highest levels of Math, e.g., 30-1, 30-2, Applied, etc.		
BIOLOGY			ENGLISH			PHYSICS			MATH		
CHEMISTRY			FRENCH (Or approved second language)			SCIENCE			MATH		
COMPUTER SCIENCE			MUSIC			SOCIAL STUDIES			MATH		
English Language Placement Test: (Please Enter Score)			TOEFL	IELTS	CAEL	MELAB	PTE				

POST SECONDARY EDUCATION Attach list if more than two. Attached

Name of University/College/Technical Institute (List MOST RECENT first)	LOCATION City / Province	Last Attended Year / Month	Length of Program	Certificate/Diploma Obtained or Number of Years Completed

PROGRAM CHOICE INFORMATION

1 st Program Choice	2 nd Program Choice
MAJOR (if applicable)	MAJOR (if applicable)
<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Distance <input type="checkbox"/> On Campus	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Distance <input type="checkbox"/> On Campus
If you do not gain admission to your program of choice, would you like to be considered for the Open Studies Program? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Note: If you are accepted into your first program of choice, your application for your second choice will not be processed.	
Bachelor of Education Secondary applicants MUST declare a major. Please see a full list of available majors at www.rdc.ab.ca/programs/academic-calendar	
<input type="checkbox"/> Visiting Student (Specify: University/College – Letter of Permission required) :	

DECLARATION OF APPLICANT

The personal information on this form is collected under the authority of the Post-secondary Learning Act of Alberta, the Freedom of Information and Protection of Privacy Act of Alberta (FOIP), Section 33, the Statistics Act of Canada and the Income Tax Act of Canada. The information will be protected in compliance with FOIP used by the Office of the Registrar to determine your eligibility for admission and registration in current and future programs; collecting transcripts; administering records, scholarships and awards; providing student services; and for alumni relations and fundraising. The personal information may be disclosed to academic and administrative units for College planning and research activities; federal and provincial agencies for reporting requirements; contracted or public health care providers, including collaborative educational, funding, and workplace agencies as required; and the Student's Association of Red Deer College through data sharing agreements. The information will be retained in accordance with approved Information Management guidelines. If you have any questions about the collection and use of this personal information, please contact the Registrar, Red Deer College, 100 College Blvd., Box 5005, Red Deer, Alberta, T4N 5H5, Telephone: 403.342.3400.

Declaration of aboriginal descent is self-proclaimed. ALBERTA ADVANCED EDUCATION IS COLLECTING THIS PERSONAL INFORMATION PURSUANT TO SECTION 33(C) OF THE FOIP ACT AS THE INFORMATION RELATES DIRECTLY TO AND IS NECESSARY TO MEET ITS MANDATE AND RESPONSIBILITIES TO MEASURE SYSTEM EFFECTIVENESS OVER TIME AND DEVELOP POLICIES, PROGRAMS AND SERVICES TO IMPROVE ABORIGINAL LEARNER SUCCESS. For further information or if you have questions regarding the collection activity, please contact the Office of the Director, Research Accountability and Data Collection, Alberta Advanced Education, 10155-102 Street, Edmonton AB, T5J 4L5, (780) 422-4322. If you have any questions regarding the collection activity of the post-secondary institution, please contact the Registrar of Red Deer College.

I certify that the information provided is true and complete in all respects and that no information has been withheld. I understand that falsifying or omitting documents or information on this application will result in immediate and permanent dismissal from the College. Falsified documents may be referred to the appropriate authorities for prosecution of the applicant under the Criminal Code of Canada. The College reserves the right to refuse admission or cancel any admission ruling. I agree, if admitted, to comply with all College policies and understand my rights and responsibilities as a Red Deer College student. I agree, if admitted to Red Deer College, to comply with all rules and regulations of the College.

SIGNATURE OF APPLICANT	DATE OF APPLICATION
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