

Dumont Technical Institute

Student Application Form

917-22nd Street West, Saskatoon, Saskatchewan S7M 0R9
Phone: 306-242-6070 Fax: 306-242-0002 Toll-Free: 1-877-488-6888
www.gdins.org



Personal Information

Last Name _____

First Name _____

Preferred Name (if different from First Name) _____

Middle Name(s) _____

Former Name (if applicable) _____

Apt. Number _____ Street _____

City or Town _____ Box Number _____

Province _____ Postal Code _____

Telephone (home) () _____

Telephone (business) () _____

Telephone (cell) () _____

Email Address _____

Male Female Date of Birth _____
month/day/year

Social Insurance Number _____ Health Card Number _____

Aboriginal Ancestry: Métis Status Indian Non-Status Indian Other

Main Activity in Prior 12 Months: Working Student Unemployed

Other _____

Are you currently receiving: Employment Insurance Social Assistance None

Emergency Contact (someone not living with you) Phone Number () _____

Name _____ Relationship to you _____

GABRIEL DUMONT INSTITUTE
of Native Studies and Applied Research



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Program Information

You must complete a separate application form for each program and location to which you are applying

Program Name: _____

Program Location: _____

How did you learn about the program? Career Fair Radio Program Brochure
DTI Staff Website Facebook Friend/Relative Promotional Items
Digital Sign Newspaper TV High School Presentation

Other _____

Education

HIGHEST PRIOR EDUCATIONAL EXPERIENCE: Completed Degree Program

Completed a certificate program Completed some High School or some ABE

Completed High School, GED, or ABE Level 4 Completed Elementary School

Please list any current or prior post-secondary education, including DTI programs:

<i>Program</i>	<i>Institute/School</i>	<i>Dates</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please attach a cover letter telling us, in your own words, why you are interested in this program.

Declaration

The privacy of your information is important to us. Personal information that you provide to DTI may be shared with Gabriel Dumont Institute Training and Employment for the purpose of planning, education, and employment-related assistance. If you do not wish to share your information, please contact the Student Registration Department at 306-242-6070.

In signing this form, I acknowledge my consent to DTI's use and disclosure of my personal information as outlined above.

I hereby certify that all the information on this form is true and complete.

Signature

Date

For Office Use Only: Date Application Received: _____

Processed by: _____

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