

Residence Application 2018 Smithers Campus



Please complete all information before submitting and print clearly:

First and Middle Names (Legal)

Last Name

Address

City

()

Province

Postal Code

Telephone Number

Email (please print clearly)

Birth date (yyyy/mm/dd)

Please have a valid email address. This is how you will be notified of your acceptance into residence

CMTN Student I.D. #: _____ ○

Male

○r Female

Program start date: _____ (mm/dd/yy)

Program end date: _____ (mm/dd/yy)

Emergency Contact: _____ Number: _____

Relationship to Emergency Contact: _____

Applicant Declaration:

In making this application, I confirm that I have read and agreed to the terms and conditions of this application, and that all the information on this application is correct. I also acknowledge that occupancy in the CMTN Residence requires compliance with the policies and regulation as publishes in the CMTN Residence Handbook, and of which may be amended by CMTN at any time with appropriate posted notice.

Applicant Signature: _____ Date: _____

Protection of Privacy: I understand that this information, along with subsequent information placed in my file, will be used for the purposes of the Residence Agreement and other purposes consistent with the mandate of the institution under the Colleges and Institutes Act. The use of this information will be in compliance with the NC Freedom of Information Privacy Act (1992)