



Northern Lights  
College

# CONTINUING EDUCATION REGISTRATION FORM

Use this form to register. Submit a completed form to any Campus Services Office or email to [studenthelp@nlc.bc.ca](mailto:studenthelp@nlc.bc.ca) (form must be signed). Please allow 1 business day for processing.

\* indicates a required field

<b>Personal Information</b>	Last or family name*		NLC student number	
	Middle name(s)		First or given name	
	Former last or family name		Date of Birth (yyyy/mm/dd)*	
	Gender* <input type="checkbox"/> Male <input type="checkbox"/> Female		Preferred first name/nickname	
	Do you identify yourself as an Aboriginal person, that is, First Nations, Métis or Inuit? <input type="checkbox"/> Yes		Country of citizenship* <input type="checkbox"/> First Nations <input type="checkbox"/> Métis <input type="checkbox"/> Inuit	

<b>Contact Information</b>	Mailing Address*		
	City	Province	Postal Code
	Primary phone*	Other phone	
	Email address*		
	Please update my existing contact information effective (yyy/mm/dd):		

<b>Registration</b>	Course Title	Start Date	NLC Registration Code

<b>Declaration</b>	I hereby declare that the information I have submitted on this form is true and correct to the best of my knowledge. Completion and submission of this form permits Northern Lights College (NLC) to request and/or confirm any information necessary to support my enrolment. I understand any misrepresentation of this information may result in the cancellation of my enrolment and falsifying documents or information may result in immediate and permanent dismissal from the College. I agree to abide by the rules and regulations of NLC as published in the Calendar, the policies as published in the NLC Policy Manual, and those of the department and program in which I shall be registered, and any changes which may be made while I am a student at the NLC.	
	_____ Signature	_____ Date

## Freedom of Information and Protection of Privacy

Information collected and maintained as part of our student records is collected under the authority of the Colleges and Institutes Act. Northern Lights College gathers and maintains information used for the purposes of admission, registration and other fundamental activities related to being a member of the Northern Lights College community and attending a public post-secondary institution in the Province of British Columbia as well as broader safety purposes including ensuring security on all Northern Lights College campuses. Information you provide will also be used for non-administrative research purposes. This research includes longitudinal research using anonymous linked records in the B.C. Educational Records Linkage File (Link File). The personal records in the Link File are not identifiable and are not used for administration purposes. For further information please contact the Registrar's Office.

## Office Use Only

<input type="checkbox"/> Ensure form is complete ( <i>Telereg</i> minimum required: Student ID, Full Name, BD and Clerk Name printed in Signature Block) <input type="checkbox"/> Confirm contact information is updated in Colleague if existing <input type="checkbox"/> Process <input type="checkbox"/> Record student ID number on form <input type="checkbox"/> Confirm completion with student or initiator (email or mail receipts)	Received by (name, please print)
	Date Received