



Saskatchewan Indian Institute of Technologies (S.I.I.T)

Application for Admission

Program Information

Program Name: _____

Program Location: _____

SIIT Information

Have you participated in a SIIT program before? Yes No

Student Number (if applicable): _____

Name, location and year of program (if applicable): _____

How did you hear about SIIT: _____

Personal Information

Legal first & last name: _____ Middle initial: _____

Maiden name (if applicable): _____

Number of dependents at home: _____ Date of Birth (DD/MM/YYYY): _____ Gender: _____

Marital Status: Married Single Common-Law Divorced Widowed

Do you self-declare to be a person with a disability?: Yes No I do not wish to answer

If you answered yes, do you consent to be contacted to participate in a process of developing a learning plan or to discuss accommodation options? Yes No

Please provide more information if applicable:

Aboriginal Ancestry and Affiliation:

Status Indian Non Status Indian Metis Non Aboriginal Permanent Resident Visible Minority

First Nations: _____

Treaty Number: _____

Did you arrive to Canada within the last 5 years: Yes If yes, arrival date: _____ No

Are you legally entitled to work in Canada?: Yes No

Contact Information

Main Phone: _____ Cell phone: _____

I don't have a phone/cell:

E-mail: _____

Current Street Address/PO Box: _____

City/Town, Province, Postal Code: _____