SRAM
service régional d'admission du montréal métropolitain

APPLICATION FOR ADMISSION

Before completing this form carefully, read the instructions in the attached document

Do not write in shaded areas

A: PERSONAL INFORMATION

Permanent code
as the statement of marks from ministère de l'Éducation transcript — Letters | Numbers

Date of birth — Day | Month | Year

Family name at birth

Sex M F

Usual given name

Mother tongue — French 1 | English 2 | Other 3

Spoken language at home — French 1 | English 2 | Other 3

B: PERMANENT ADDRESS

Number | Street / Rural route / P.O. Box | Apartment

City / Town | Province | Postal Code (important)

Country

Telephone at home — Area code | Number

Telephone at work — Area code | Number

C: OTHER INFORMATION

E-mail address

Birthplace
1 Province of Québec | 2 Elsewhere in Canada | 3 Outside Canada

City / town of birth

Country of birth

Place of permanent residence on Jan 1st 2006 — Province of Québec | Elsewhere in Canada | Outside Canada

Legal status of residence in Canada

Canadian citizen — ***Specify:*** 1 Canadian citizen by birth | 2 Amerindian | 3 Inuit | 4 Naturalized Canadian citizen

Other — ***Specify:*** 1 Member of diplomatic family | 2 Refugee | 3 Temporary work permit | 4 Permanent resident | 5 Student visa | 6 Other | 7 No visa

Father's family name (even if deceased)

Father's given name (even if deceased)

Mother's maiden name (even if deceased)

Mother's given name (even if deceased)

Country of citizenship (if other than canadian)

Official document

D: ACADEMIC BACKGROUND

Actual occupation — 1 Studies | 2 Work | 3 Other

1a. What is the last secondary institution presently or previously attended?

Name of the institution

Name of the school board (if applicable)

1b. Have you ever taken or are you taking adult education courses in a secondary level institution? 1 Yes | 2 No — **If yes,** are you presently taking these courses ? 1 Yes | 2 No

2. Have you ever taken or are you taking courses in a collegial level institution? 1 Yes — **If yes** a) Name of last institution attended

2 No — b) Are you presently attending this institution ? 1 Yes | 2 No

3. Have you ever taken or are you taking courses in an university 1 Yes | 2 No — **If yes** Name of last institution attended

E: REQUEST FOR ADMISSION

Choice of cegep and program. (Consult the admission guide to make sure that the program title and number correspond and that this program is offered at the cegep of your choice.)

Name of cegep | Title of program | Corresponding number | Particularity (if any)

I am applying for regular full time day education, for the following semester: Fall 3 | Winter 1

I hereby declare that the information given above is correct. I authorize the Cegep or his substitute to verify the documents included or other information requested. I authorise the ministère de l'Éducation and educational establishments to forward to the Cegep or his substitute my school results. I also authorize the Registrar of Civil status of Québec to forward to the Cegep or his substitute the information requested to establish my birthplace.

Date

X
Signature of candidate or of parent or guardian if candidate is a minor