

APPLICATION FOR ADMISSION



Building Code Training for Canadians

Desired Examination Location Registration Date				
PERSONAL INFORMATION	ſ	SBOA Member:	Yes □ No	
Name				
Name Last Name		First Name		Initial
AddressStreet or P.O. Bo	OX	Town/City		Province
Postal Code			Phone Work	
Social Insurance Number				
		Zindir i kadi ess		
Birthdate:				
EDUCATION BACKGROUN	D			
Grade Level Obtained			Year	
Grade Level Obtained by	☐ Elementary/High School	ol 🗆 ABE	□ GED	
University/Technical Institute Atter	ndance: (please indicate name	of Diploma, Certificate, etc	.)	
☐ Certificate ☐ Diplon	na 🗆 Degree 🗆	Other		
	D 1111 OCC 1 10		·	
Have you received previous training				
If yes, please explain				
Have you received training in the A	pprenticeship Program?	☐ Yes ☐ N	No	
If yes, please explain				
How many years' experience do yo	u have as a Ruilding Official?)		
trow many years experience do yo	u nave as a bunding official:			
FINANCIAL INFORMATION	NT			
Program Tuition		al Costs		
Method of Payment:				
☐ Cheque ☐ Master	Card/VISA #	Exp:		CVC:
	yer/Sponsor			
Name & Address of Employer/Spor	nsor			
Name of person who should receive	invoice			
Submit Application form to:	Southeast College P.O. Box 1565 Weyburn, SK S4H (Phone: (306) 848-250 Email: wbexams@sou	Fax: (306) 848-25	17	
Please make cheques payable to So		- 		
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Signature of Applicant ___