APPLICATION FOR ADMISSION

PROCEDURE FOR APPLYING TO COLLEGE PROGRAMS

NEW: APPLICANTS CANNOT HAVE MORE THAN TWO ACTIVE APPLICATIONS FOR THE SAME ACADEMIC YEAR

THE APPLICANT MUST SUBMIT:

1. Fully completed application form.
2. Official high school transcript or high school equivalency marks (post-secondary transcript for post-diploma programs):
   a. For Newfoundland and Labrador applicants:
      - If you attended/graduated High School in Newfoundland and Labrador prior to 2020, the College can obtain your high school marks directly from the Department of Education if you provide your MCP number on your application.
      - If you attended/graduated High School in Newfoundland and Labrador in 2020 or later, the College can obtain your high school marks directly from the Department of Education if you provide your High School Student # on your application.
      - If you are presently in Level III of High School in Newfoundland and Labrador, the College will obtain a copy of your high school marks directly from the Department of Education once final marks are available, as long as you provide your High School Student # on your application.

   b. For Canadian applicants outside of Newfoundland and Labrador:
      - Forward official transcript of high school marks or high school equivalency marks to the campus address you applied to.

   c. For International applicants:
      - Forward official transcripts to the Prince Philip Drive Campus, regardless of the program/campus being applied to.
3. A non-refundable application processing fee ($30 Canadian citizens, $100 International applicants) must accompany the completed application.
   - Application fee is required for all College programs EXCEPT individualized courses through Distributed Learning or Continuous Learning courses
   - Cheques or money orders must be made payable to College of the North Atlantic
   - **If more than two applications are submitted, the application fees for the extra applications will not be refunded.**

Some programs require additional supporting documentation. Refer to the College Calendar for specific requirements related to your program of choice. Application is complete when ALL documentation is received.

APPLICATION FORM SHOULD BE MAILED TO THE CAMPUS WHERE THE PROGRAM IS OFFERED.
REFER TO THE COLLEGE CALENDAR OR WEBSITE (www.cna.nl.ca) FOR PROGRAMS OFFERED AT EACH CAMPUS.

☐ Baie Verte Campus
1 Terra Nova Road
Baie Verte, NL
Canada A0K 1B0
Telephone: (709) 532 8066
Fax: (709) 532 4624

☐ Bay St. George and
Port aux Basques Campuses
P.O. Box 5400
Stephenville, NL
Canada A2N 2Z6
Telephone: (709) 643 7838
Fax: (709) 643 7734

☐ Burin Campus
P.O. Box 370
Burin Bay Arm, NL
Canada A0E 1G0
Telephone: (709) 891 5600
Fax: (709) 891 2812
Toll Free: 1 800 838 0976

☐ Carbonear and
Placentia Campuses
4 Pike's Lane
Carbonear, NL
Canada A1Y 1A7
Telephone: (709) 596 6139
Fax: (709) 596 2688

☐ Clarenville, Bonavista and
Distributed Learning Campuses
69 Pleasant Street
Clarenville, NL
Canada A5A 1V9
Telephone: (709) 466 6901
Fax: (709) 466 2771

☐ Corner Brook and St. Anthony
Campuses
P.O. Box 822
Corner Brook, NL
Canada A2H 6H6
Telephone: (709) 637 8530
Fax: (709) 634 2126

☐ Grand Falls-Windsor Campus
5 Cromer Avenue
Grand Falls – Windsor, NL
Canada A2A 1X3
Telephone: (709) 292 5600
Fax: (709) 489 5765

☐ Gander Campus
P.O. Box 395
Gander, NL
Canada A1V 1W8
Telephone: (709) 651 4800
Fax: (709) 651 4854

☐ Happy Valley-Goose Bay and
Labrador West Campuses
P.O. Box 1720 Stn 'B'
Happy Valley – Goose Bay, NL
Canada A0P 1E0
Telephone: (709) 896 6300
Fax: (709) 896 3733

☐ Prince Philip Drive Campus
P.O. Box 1693
St. John's, NL
Canada A1C 5P7
Telephone: (709) 758 7284
Fax: (709) 758 7304

☐ Ridge Road Campus
P.O. Box 1150
St. John's, NL
Canada A1C 6L8
Telephone: (709) 758 7000
Fax: (709) 758 7059

☐ Seal Cove Campus
1670 Conception Bay Highway
P.O. Box 19003
Conception Bay South, NL
Canada A1X 5C7
Telephone: (709) 744 2047
Fax: (709) 744 3929

PRIVACY NOTICE

College of the North Atlantic (CNA) is collecting your personal information under the authority of the College Act, 1996, and the Access to Information and Protection of Privacy (ATIPP) Act, 2015. Your personal information is being collected for the purpose of assigning or validating your CNA student identification number; processing your application; verifying your qualifications and determining eligibility for admission, administering student records, scholarships and awards; documenting your progress in your academic program; providing student and alumni services; institutional research and planning. This information and any information generated about you during the course of your studies at CNA will be used by college employees to complete their work in relation to your studies. It may be shared with the following: academic and administrative units of the College in accordance with the policies and procedures of CNA; the Government of Newfoundland and Labrador or the Government of Canada as required by law for reporting purposes; donors (or their representatives) of scholarships, awards and bursaries administered by the College; high school and post-secondary institutions as required for new and transfer applications; student health insurance providers as necessary. Your personal information is protected from unauthorized collection, access, use and disclosure in accordance with the ATIPP Act, 2015. It can be reviewed or corrected upon request. If you would like to further discuss how CNA collects and uses your personal information, please contact the College's Registrar at College of the North Atlantic – Headquarters, 432 Massachusetts Drive, P.O. Box 5400, Stephenville, Newfoundland and Labrador, Canada, A2N 2Z6, telephone (709) 643 0827, or e-mail registrar@cna.nl.ca.

STUDENT DECLARATION

In submitting this information, I declare that the information in this application is correct and complete. I understand that any applicant who submits documents or forms that are falsified or fraudulent, and/or who does not fully and accurately disclose the requisite information as set forth herein or in related documents, may be denied admission to College of the North Atlantic (CNA) and if it occurs or is discovered after admission, may be expelled from the College. I further acknowledge my understanding that applicants are obligated to include attendance, past attendance and enrollment at other post-secondary institutions on the application. I understand that information on falsified documents or fraudulent admission may be shared with the Association of Registrars of the Universities and Colleges of Canada, and I hereby consent to same. In submitting this application, I agree to be bound by the policies, rules and regulations set forth by College of the North Atlantic.

FOR OFFICE USE ONLY – STUDENT ID NUMBER

Please indicate Student ID Number if you previously attended CNA or one of the previous colleges	

APPLICANT – PERSONAL INFORMATION

First Name: *(Same as on Government issued documents)*	Middle Name: *(Same as on Government issued documents)*	Last Name: *(Same as on Government issued documents)*
Previous Last Name:		Date of Birth: mm dd yy
MCP Number #: (12 digits - *Mandatory for applicants who attended/graduated a NL High School prior to 2020)*		High School Student Number #: (7 digits - *Mandatory for applicants who attended/graduated a NL High School in 2020 or later)*
SIN: (*Mandatory for Canadian students in accordance with the regulations of the Income Tax Act)*		
Gender:		Marital Status:
Home Address: P.O. Box _____ (if applicable)		Phone: (home)
City:	Prov:	Postal Code:
Mailing Address: (*if different from home)* P.O. Box _____ (if applicable)		Phone: (cell)
City:	Prov:	Postal Code:
E-mail: *(must be the applicant's e-mail)*		

The following information could help CNA to improve student services and program offerings.
Are you an Indigenous person? ❒ Yes ❒ No ❒ Prefer not to say
If you are an Indigenous person, please indicate which Indigenous organization you are a member of (for example, Miawpukek First Nation, Sheshatshiu Innu First Nation, Qalipu First Nation, etc.):_____

NEW: Applicants cannot have more than two active applications for the same academic year. If more than two applications are submitted, the application fees for the extra applications will not be refunded.

APPLICATION FOR PROGRAM

Program for which you are applying: ❒ Full-Time ❒ Part-Time

❒ Online *(check our Program Guide to confirm campus & delivery method)*
❒ On Campus Specify Campus:

Are you applying for Advanced Standing in this program? ❒ Yes ❒ No *(If yes, ensure appropriate documents are submitted)*

If applying for a program that requires a driver license, please indicate if you have a valid driver license below:

Driver License: ❒ Yes ❒ No Date Received: Class:

If applying for individual courses as a part-time student, please indicate the courses below:

	❒ On Campus	❒ Online
	❒ On Campus	❒ Online
	❒ On Campus	❒ Online

PREVIOUS EDUCATION

Are you in High School now? ❒ No, date last attended_____ Last Grade Completed:_____

❒ Yes, anticipated date of graduation_____ Name of High School_____

Have you ever attended a college or university? ❒ Yes ❒ No

If yes, please list the program, institution, location, highest level achieved, and date last attended.

Program	Institution	Prov.	Highest Level Attained	Date

SPECIAL REQUIREMENTS

If you have a documented disability, (such as a physical disability, mental health disorder, or learning disability), you could be eligible for services related to your disability. The Accessibilities Services Coordinator can discuss your accessibility-related needs. For more information, visit the Accessibility Services page of the CNA website.
Do you have a disability? ❒ Yes ❒ No

CITIZENSHIP

Out of Province Applicant: ❒ Yes ❒ No

International Applicant: ❒ Yes ❒ No Country of Citizenship:

Status in Canada: ❒ Canadian Citizen ❒ Landed Immigrant ❒ Student Visa ❒ Work Visa

Is English your first language? ❒ Yes ❒ No If no, what is your first language?

Applicants whose first language is not English must meet the College's English proficiency requirements. The College will accept the recognized tests below.

Date Written: _____mm _____dd _____yy

CAEL Score: Duolingo Score: IELTS Academic Overall Band Score:

MELAB Score: MET Score: Pearson PTE Academic English Test Score:

TOEFL - Paper Based Score: OR Internet Based Score: OR Computer Based Score:

I hereby authorize the College to have access to my academic record from the Department of Education, or any other educational institution. I declare that I have completed this application accurately to the best of my knowledge and belief.

_____ _____
Signature of Applicant Date