

### 1. PERSONAL INFORMATION

NAME: \_\_\_\_\_  
last first middle

PREVIOUS NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
if applicable day/month/year

AUArts ID # (if known): \_\_\_\_\_ EMAIL: \_\_\_\_\_  
if known

ADDRESS: \_\_\_\_\_  
street / box office number city

\_\_\_\_\_ province country postal code

TELEPHONE: ( ) \_\_\_\_\_

ALBERTA STUDENT NUMBER (if known): \_\_\_\_\_

### 2. OTHER INFORMATION

CITIZENSHIP STATUS:  CANADIAN CITIZEN  INTERNATIONAL/NON CITIZEN  
 PERMANENT RESIDENT

COUNTRY OF CITIZENSHIP (if not Canadian): \_\_\_\_\_

INDIGENOUS STATUS:  INUIT  STATUS INDIAN/First Nations  
(If you wish to declare)  METIS  NON STATUS INDIAN/First nations

### 3. APPLICATION DETAILS

SUMMER RESIDENCY APPLICATION FOR:  
 SUMMER RESIDENCY PROGRAM  
 GLASS SELF-DIRECTED RESIDENCY SESSION A  
 GLASS SELF-DIRECTED RESIDENCY SESSION B

OPTIONS:  
 ID CARD REQUIRED (DO NOT CHOOSE IF YOU HAVE AN EXISTING AUARTS ID CARD)  
 LOCKER REQUIRED (ADDITIONAL FEE APPLIES IF YOU CHOOSE TO RENT A LOCKER)

### 4. EMERGENCY CONTACT

NAME: \_\_\_\_\_ EMAIL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: ( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
home work

## 5. DECLARATION

The information collected on this form is collected under the authority of the Post-secondary Learning Act, the Statistics Act (Canada), the Taxation Act (Canada), and section 33(c) of the Freedom of Information and Protection of Privacy Act. The information collected is protected by the provisions of the Freedom of Information and Protection of Privacy Act.

I acknowledge that the information will be used to create records for the purpose of determining eligibility for admission to Alberta University of the Arts (AUArts) and to distribute information about AUArts programs and services. I understand that all documentation submitted in support of this or any subsequent application for admission, financial award or any appeal or petition becomes the property of the AUArts and will not be returned to me. If I am admitted, the information will be part of my student record and will be disclosed to relevant academic and administrative departments for the purposes of administration of AUArts policies, procedures, academic or nonacademic services, registration, providing tax receipts, determining eligibility for scholarships and awards, graduation, distributing follow-up educational information, AUArts research, and alumni relations. In addition, specific elements of information will be disclosed to the federal and provincial governments to meet reporting requirements and to the AUArts Students' Association and other cooperating educational, funding and workplace agencies in accordance with contractual agreements. If granted an award, pertinent information will be released to the donor of the award and provincial funding bodies. At AUArts, the following information is defined as a student's public record: name, active registration and graduation, major and degree/diplomas awarded, and awards received/granted. In the absence of specific provincial legislation and consistent with current practice in other postsecondary institutions in Alberta, information pertaining to a minor who is registered at AUArts will only be used and disclosed in accordance with privacy legislation. Personal information will not be disclosed to or discussed with any guardian or relative without written approval submitted by the individual to whom the personal information pertains. For more information regarding the collection or use of this information, contact the FOIP Coordinator at [foip@auarts.ca](mailto:foip@auarts.ca).

I certify that I have read and understood all the instructions and information accompanying this application form and that all statements made in connection with this application are true and complete in all respects. I understand that misrepresentation, falsification of documents, or withholding requested information are serious offences which may result in the cancellation of my admission and / or registration at AUArts. If I am admitted, I agree to be bound by the rules and regulations in existence or as amended from time to time by the AUArts Board of Governors.

APPLICANT'S SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

day/month/year

Feb 23 AA

### OFFICE USE/SAAQUIK (create application record)

TERM: \_\_\_\_\_

NON-DEGREE DUAL CREDIT:      LEVEL: 01      CAMPUS: 1      UNIVERSITY: 08      DEGREE: 4      PROGRAM: UNCL

RATE: REG      MAJOR: DUCR

DATE ENTERED: \_\_\_\_\_