

Non Credit Registration



Academic Session
" Fall " Winter
" Spring " Summer

Student Administrative Services
62 York Street, Sackville, New Brunswick, Canada E4L 1E2

Non Credit Registration

PLEASE READ CAREFULLY

Please read carefully and answer each question completely to the best of your knowledge.

For further information, please contact the Office of Student Administrative Services at the address above or:

Phone: (506) 364-2269
Fax: (506) 364-2272

World Wide Web Campus Information
www.mta.ca/

Last Name	First Name	Student ID.
Middle Name	Preferred Name	E-mail Address
Permanent Address Number / Street / PO Box		Phone
Town / City	Province	() Fax
Postal Code	Country	()
Current Address (if different from above) Number / Street / PO Box		
Town / City	Province	Postal Code
Country	Address Valid Until year / month / day	Phone
County of Residence (Maritimes only)	Marital Status " Single " Married	Maiden Name
Social Insurance Number	Country of Citizenship	Gender " Male " Female
Date of Birth year / month / day / /	Mother Tongue " English " French " Other	
Place of Birth Town / City / Province		
Status in Canada (if International student) " Permanent Resident " Student Visa " Other Visa Entry Date:		
Have you ever registered for a credit or non credit course from Mount Allison? " Yes " No If yes, when? (y / m / d)		
Course for which you wish to register:		

The statements contained in this application are true and accurate to the best of my knowledge.

Signature _____ Date _____