

# SUNTEP

Saskatchewan Urban Native Teacher Education Program

## Student Application Form

LAST NAME \_\_\_\_\_ GIVEN NAME(S) \_\_\_\_\_

SOCIAL INSURANCE NO. \_\_\_\_\_ HOSPITALIZATION NO. \_\_\_\_\_

BIRTHDATE \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Single \_\_\_\_\_ Married \_\_\_\_\_ Other \_\_\_\_\_ No. of Dependents \_\_\_\_\_ No. under Six \_\_\_\_\_

**PERMANENT ADDRESS:**

Street Address \_\_\_\_\_ City \_\_\_\_\_

Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Phone \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_ as above, or:

Street Address \_\_\_\_\_ City \_\_\_\_\_

Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Phone \_\_\_\_\_

Please indicate if you are:

Metis - MNS Local (Name and Number) \_\_\_\_\_

Non-Status Indian (Home Community) \_\_\_\_\_

First Nations (Band Affiliation) \_\_\_\_\_

Bill C-31 (Band Affiliation) \_\_\_\_\_ Other \_\_\_\_\_

**ABORIGINAL LANGUAGE(S) SPOKEN:**

Cree \_\_\_\_\_ Saulteaux \_\_\_\_\_ Dene \_\_\_\_\_ Assiniboine \_\_\_\_\_ Other (Specify) \_\_\_\_\_

**NAME AND ADDRESS OF NEXT OF KIN TO BE CONTACTED IN CASE OF EMERGENCY:**

**EDUCATION:**

Name of School	Location	Dates	Grade/Course
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**EMPLOYMENT:**

Employer Name	Location	Dates	Position
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**REFERENCES:**

Name	Address	Occupation	Phone No.
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**EMPLOYMENT HISTORY:**

Are you currently employed? \_\_\_\_\_ For how long? \_\_\_\_\_ Job type? \_\_\_\_\_  
Are you unemployed? \_\_\_\_\_ On Employment Insurance benefits? \_\_\_\_\_ On Social Assistance? \_\_\_\_\_  
If you are unemployed, on unemployment insurance, or on social assistance, please indicate for how long. 24 weeks or more \_\_\_\_\_ less than 24 weeks \_\_\_\_\_

**FINANCES:**

How do you plan to finance yourself while attending this program?  
\_\_\_\_\_  
Have you taken out student loans before? \_\_\_\_\_  
If yes, what courses were you taking at the time? \_\_\_\_\_  
\_\_\_\_\_  
Were you eligible for remission? \_\_\_\_\_  
\_\_\_\_\_

**PLEASE INDICATE YOUR 1st and 2nd choice of centre locations:**

Regina \_\_\_\_\_ Saskatoon \_\_\_\_\_ Prince Albert \_\_\_\_\_  
Reason: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The following documents must be submitted with your application:

1. A one page handwritten statement indicating your reasons for applying and your interest in a professional teacher training program.
2. Three letters of reference: one from your Metis Local, Education Committee or Funding Agency, one from an Instructor or Principal of the last educational institute you attended, and the other from someone who knows you very well.
3. A transcript of your grades from the last high school and/or post-secondary institution you have attended.

**DROP OFF, MAIL OR FAX YOUR APPLICATION FORM TO ONE OF THE FOLLOWING CENTRES:**

**SUNTEP PRINCE ALBERT**  
48 - 12th Street East  
Prince Albert, SK S6V 1B2  
Phone: 764-1797  
Fax: 764-3995

**SUNTEP SASKATOON**  
Room 7 McLean Hall  
University of Saskatchewan  
106 Wiggins Road  
Saskatoon, SK S7N 5E6  
Phone: 975-7095  
Fax: 975-1108

**SUNTEP REGINA**  
Education Building  
University of Regina  
3737 Wascana Parkway  
Regina, SK S4S 0A2  
Phone: 347-4110  
Fax: 347-4119

How did you hear about SUNTEP? \_\_\_\_\_

Do you know anyone in the program? \_\_\_\_\_

When you imagine yourself as a teacher in the classroom, what is the appropriate age of the students you are working with? \_\_\_\_\_

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

For further information, please contact the Program Coordinator at one of the SUNTEP centres.

***All information contained on this application form will be kept confidential.***