

Kyah Wiget Adult Learning Center

Mailing Address:
205 Beaver Road, Suite #2
Smithers, BC
VOJ 2N1



Contact Info:
(250) 847- 2244 Ext. 604

STUDENT REGISTRATION FORM

Please complete the form using a pen.

For which program are you applying? UCEP (Grade 12) ☐ Discovery Pre-Trades (Grade 10) ☐

Applicant Student Information			
Legal Last Name		Street Address	
Middle Name		Town	
Legal First Name		Postal Code	
Nick Name		Mailing Address	
SIN Number		Town	
Band e.g. Witsuwit'en		Postal Code	
Status Number		Tel. home	
Clan e.g. Liksilyhu		Tel. cell	
Birthdate (DD/MM/YYYY)		Email	

Support Group			
Nominate at least 3 adults to support your journey in the UCEP or Pre-Employment Program. They may include a parent, family member, or friend and may join your IEP meetings, some outdoor activities and short trips, events, and discussions with teachers. Adult Ed will not share personal information with the group without your permission.			
Contact First and Last Name	Relationship to applicant	Telephone Numbers	Street Address
1		home: work: cell:	
2		home: work: cell:	
3		home: work: cell:	

School Information	
PEN Number	
Last School Attended	
Years Attended ()	
Highest Grade Completed	

Medical Information	
Doctor	
Care Card Number	
Do you have any allergies? If yes, please specify.	
Do you have any life-threatening illnesses? If yes, please specify.	

STUDENT SIGNATURE: _____ **Date:** _____

KWES SIGNATURE: _____ **Date:** _____

Full Name: _____

Position: _____

Documents to be submitted with the application

Copy of Status Card, Front and Back	✓	X
Resume	✓	X
Transcript or last Report Card	✓	X
Direct Deposit Slip (Obtained from your bank)	✓	X