

PERSONAL INFORMATION RECORD

➤ **Personal Information Record to be completed prior to an Admissions interview**

This background information will allow the Admissions Advisor to conduct a personal interview that best meets your needs.

PERSONAL AND GENERAL INFORMATION

Date _____

Last Name

First Name

M/F

Current or Local Mailing Address

Phone

City

Province

Postal Code

Email Address

Are you a Canadian citizen or Permanent Resident? ☐ Yes ☐ No If no, current status: _____

How did you *first* hear about Herzing College? (Check one):

☐ Internet-search ☐ Internet-Website ☐ Internet-social media ☐ Print ☐ Bus/subway ☐ Radio
☐ TV ☐ Friend/family ☐ Walk-in / Sign ☐ Other: _____

WORK EXPERIENCE

Are you working full time presently? ☐ Yes ☐ No Part-time? ☐ Yes ☐ No

If you are working, are you satisfied with your present job or occupation? ☐ Yes ☐ No

If no, is it because of: ☐ Earnings ☐ Future Potential ☐ Job Conditions

With additional education do you have opportunities for advancement with your present employer? ☐ Yes ☐ No

Current/Last Employer

City

Phone

Start Date

Job role

Do you wish to request accommodation for a disability? ☐ Yes ☐ No

PROGRAM OF INTEREST

Indicate your choice of program:

- | | | |
|---|--|---|
| <input type="checkbox"/> Community Service Worker | <input type="checkbox"/> Business Administration | <input type="checkbox"/> Medical Office Admin |
| <input type="checkbox"/> Building Design Technician | <input type="checkbox"/> Accounting & Payroll Admin | <input type="checkbox"/> Occupational Health & Safety |
| <input type="checkbox"/> Pharmacy Assistant | <input type="checkbox"/> Computer Network Technology | <input type="checkbox"/> Immigration Case Manager |
| <input type="checkbox"/> Paralegal | <input type="checkbox"/> Computer Graphic Design | <input type="checkbox"/> Cybersecurity Specialist |

Indicate schedule preference:

- ☐ Mornings ☐ Afternoons ☐ Evenings

Indicate semester preferred start period:

- ☐ Spring ☐ Fall ☐ Winter

EDUCATIONAL BACKGROUND

- ☐ I am a high school graduate Year of Graduation: _____
I graduated or attended the following High School:

Name

- ☐ I obtained my GED. Date received: _____

- ☐ I have attended the following Post Secondary Institutions:

Name

Did you graduate? ☐ Yes ☐ No

Name

Did you graduate? ☐ Yes ☐ No

GOALS AND PLANNING

1. What goals do you have which you believe the education at Herzing College will help you reach?

2. What are possible problems that could interfere with completing your studies at Herzing College? (i.e. child care, transportation) How can we help to overcome them?

3. What means do you plan to use to financially fund your education? ☐ Personal/Family savings ☐ Company

☐ Employment Ontario (EI) ☐ Other _____

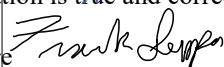
4. Do you have the following valid identification:

☐ SIN Card ☐ Photo ID (driver's license, passport, PR card, Citizenship card)

Citizenship: one of the following: ☐ Birth Certificate ☐ PR card ☐ Citizenship card ☐ Passport

The above information is true and correct to the best of my knowledge.

Applicant Signature



06/09/2022

Date: _____