

PRE-ENROLLMENT FORM 1997

DETAILS ABOUT THE APPLICANT:

FAMILY NAME: ROORDA

GIVEN NAME: PAUL

FATHER'S F. NAME.:

GIVEN NAME:

MOTHER'S F. NAME:

GIVEN NAME:

D.O.B. Dec 19, 1964

NATIONALITY: Canadian

ADDRESS: RES: 882 Inverness Ave.
Dunsmuir, B.C.
CANADA.

POSTAL ADDRESS:

OFFICE: VSB [redacted]

QUALIFICATIONS: BA. BEd MA.

WORK EXPERIENCE: Teaching - (4 years)
Social work - (3 years)

PRESENT JOB/PROFESSION: Teacher - 7th Standard.

PROPOSED COURSE : ☒ CERTIFICATE ☐ ASSOCIATE CERTIFICATE ☐
☒ ADVANCED CERTIFICATE ☐ DIPLOMA ☐
☒ P.G. DIPLOMA ☐

ANY OTHER COURSE(S), YOU ARE DOING: N/A.

NAME OF THE INSTITUTION:

I hereby declare that the information given on this P.E. Form is true to my best knowledge. I am willing to accept an offer of place for the above course after receiving general information and prospectus

Date: Oct 18, 1996

[redacted]
Signature of the applicant