

APPRENTICESHIP REGISTRATION FORM

REGISTERED APPRENTICES: use this form to register for Apprenticeship Technical Training.
Not a Registered Apprentice? Contact the Apprenticeship and Industry Office to get started! 1-800-248-4823

FIRST AND LAST NAME:		APPRENTICESHIP ID:	
BIRTH DATE: (MM/DD/YYYY)		NWP ID: (IF APPLICABLE)	
PHONE NUMBER:		TRADE NAME:	
EMAIL ADDRESS:		PERIOD:	

CONTACT INFORMATION

*Your contact information is supplied to NWP from your myTradesecrets account. Please ensure it is current before registering.

Apprenticeship Technical Training Schedule (class dates) can be [found here](#) or the AIT website

FIRST CHOICE			
CLASS DATES: (START/END DATES)	<input type="text"/>	CLASS CODE:	<input type="text"/>
SECOND CHOICE			
CLASS DATES: (START/END DATES)	<input type="text"/>	CLASS CODE:	<input type="text"/>

Refund Policy: Up to 4:30pm (MST) of the business day prior to the first day of class, you can withdraw through your MTS account, by emailing apprenticeship@NWPolytech.ca or in-person on either campus. A \$100.00 administrative fee will be assessed. Refunds must be requested in writing to apprenticeship@NWPolytech.ca as they are not automatically issued. If you withdraw after 4:30pm (MST) on the business day prior to the first day of class, no refund of tuition & fees will be issued.

Attendance is mandatory for all scheduled dates in an apprenticeship. The apprentice is responsible for notifying NWP if they will not be attending the first class. In the event an apprentice is not in attendance, the apprentice will have until the second class day at 2 PM to contact NWP. Failure to contact NWP may result in the apprentice being removed from class without notice and no refund will be issued.

APPRENTICE SIGNATURE: _____ DATE: _____

STUDENTS WITH DISABILITIES

I would like information about services for students with disabilities or serious health conditions

OFFICE USE ONLY	RECEIPT #:	PAID BY:	DATE REGISTERED:
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PAYMENT INFORMATION		TUITION IS DUE AT THE TIME OF REGISTRATION	
CREDIT CARD NAME HOLDER		COMPANY PO # or EMAIL ADDRESS	
CARD NUMBER		COMPANY NAME	
EXPIRY DATE		COMPANY ADDRESS	
CVV		CONTACT PERSON/PHONE NUMBER	
AMOUNT APPROVED		AGREEMENT NUMBER	FORWARDED TO FINANCIAL AID

The personal information being collected in this form will be used to enroll you in technical training and to administer your apprenticeship program. Our authority for collecting this information is section 33© of the Freedom of Information and Protection of Privacy Act, RSA 2000, c. F-25. If you have any questions about the collection of this information, you may contact the Registrar's Office, 10726 – 106 Ave, Grande Prairie, AB T8V 4C4, 780-539-2911 or toll free at 1-888-539-4772.