

Hobbies and Interests:

Employment:

Are you employed? No: _____ Yes: _____

Employers Name: _____

Hours per week: _____ How long have they employed you? _____

Parents(s) / Guardians(s) Information:

Name: _____	Name: _____
Address: _____	Address: _____
Relationship: _____	Relationship: _____
Occupation: _____	Occupation: _____
How many siblings have you: _____	Older: _____ Younger: _____

Financing Your Education:

How are you planning to pay for your post-secondary education?

Students Signature: _____

Date: _____