



Application for Admission

admissions@yukoncollege.yk.ca www.yukoncollege.yk.ca

t. 867.668.8710 f. 867.668.8899

- Complete this Application for Admission in black or blue ink and ensure it is signed. Please note that incomplete applications will not be processed. Application fee of \$30.
- Please submit this signed Application for Admission to:
Office of the Registrar, Box 2799, 500 College Drive, Whitehorse, YT, Y1A 5K4

Student number:

Office use only

A Student Information

Legal last name	First name	Middle name	Preferred first name	
Former last name	Mailing address		City/Province/Territory	Postal code
Email address	Cell phone number ()	Home phone number ()	Work phone number ()	
Please check your preferred method of communication: <input type="radio"/> Mail <input type="radio"/> Email <input type="radio"/> Phone <i>please choose one:</i> <input type="radio"/> Cell <input type="radio"/> Home <input type="radio"/> Work				

B Biographical Information

Gender	Birthdate (DD/MM/YY)	Citizenship status <input type="radio"/> Canadian or Permanent Resident <input type="radio"/> Other	Country of citizenship
Yukon College is dedicated to Aboriginal student success. <i>I wish to declare Aboriginal identity</i> (optional): <input type="radio"/> Yukon First Nation <input type="radio"/> Other First Nation <input type="radio"/> Inuit <input type="radio"/> Métis <input type="radio"/> Please contact me regarding Aboriginal student support and services			

C Program Choice

Program name (1 st choice)	<input type="radio"/> Fall term <i>Beginning September</i> <input type="radio"/> Winter term <i>Beginning January</i> <input type="radio"/> Spring/Summer term <i>Beginning May</i>	<input type="radio"/> Full-time <input type="radio"/> Part-time
Program name (2 nd choice)	<input type="radio"/> Fall term <i>Beginning September</i> <input type="radio"/> Winter term <i>Beginning January</i> <input type="radio"/> Spring/Summer term <i>Beginning May</i>	<input type="radio"/> Full-time <input type="radio"/> Part-time
Have you ever taken or applied to take a course at Yukon College? (Includes both Academic and/or Continuing Education courses) <input type="radio"/> Yes <input type="radio"/> No		
Yukon College student number (if known):		

D Education History

High school graduates or students who have completed some high school: Contact your high school and have them send us an OFFICIAL copy of your transcript.

Current high school students: If you are currently in Grade 12, please submit your interim transcript and a copy of your most recent report card. Also, arrange with your high school to have your final OFFICIAL transcript sent to the Office of the Registrar when it becomes available.

Applicants with post-secondary education: Arrange to have your OFFICIAL transcripts from all previously attended post-secondary institutions and high schools sent to Office of the Registrar, Yukon College.

If you attended *any* elementary or high school in Yukon, please select from the following list (optional):
 I attended elementary school in Yukon: in a rural Yukon community Whitehorse
 I attended high school in Yukon: in a rural Yukon community Whitehorse

D Education History *continued*

High school transcripts: Attached Will forward Post-secondary transcripts: Attached Will forward

High school last attended	City and Province/Territory	Country (if not Canada)	Dates attended (DD/MM/YY) From: To:
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Degree, diploma, certificate completed

Post-secondary institution last attended	City and Province/Territory	Country (if not Canada)	Dates attended (DD/MM/YY) From: To:
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Degree, diploma, certificate completed

E Collection, Use and Disclosure of Student Information

Personal information collected from applicants will be held and used in accordance with the Yukon Access to Information and Protection of Privacy Act (ATIPP) and the Yukon College Information Access and Privacy Protection policy. This information will be used for admission, registration, fee collection, and maintenance of your student record and other purposes consistent with the mandate of the institution. Information is shared with the Yukon College Student Union. The personal information you provide is also used for authorized statistical and research purposes.

Students who would like Yukon College to release financial and/or academic information to an individual, a parent, or an agency external to the College must give the College written permission to release that information. At the time of registration, students may authorize the release of specific information to individuals or organizations.

Please refer to the Yukon College Information Access and Privacy Protection Policy at www.yukoncollege.yk.ca for more information on the use of student information. If you have any questions about the collection, use, and disclosure of student information, please contact the Office of the Registrar at 867.668.8710.

F Declaration

I declare that the information given in this application and supporting documents is complete and correct. I authorize Yukon College to verify any information provided as part of this application. I understand and acknowledge that documents submitted as part of this application will not be returned. I understand and acknowledge that it is my responsibility to be aware of, and comply with, all Yukon College policies and procedures.

Admission to Yukon College programs is subject to assessment of qualifications and availability of seats.

Applicant's signature	Date signed (DD/MM/YY)
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_____ Payment of \$30 application fee

H Office Use

Student number:	Date received (DD/MM/YY)	Holds	Probation	SPAIDEN
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Yukon College – Center for Northern Innovation in Mining Driller’s Helper Program

The program fee is \$2,000, Ancillary fees include a \$25 technology fee and \$10 student union fee. It is up to the applicant to apply for funding if required. Successful applicants will be interviewed. Students will need to provide steel-toed boots.

For information on the program, contact:

Center for Northern Innovation in Mining

Web: yukoncollege.yk.ca/programs

Email: cnim@yukoncollege.yk.ca

Phone: 867.456.8545

Personal information

Are you a Yukon Resident?

- Yes
 No

If yes, how long?

Years: **Months:**

If Yukon First Nation, Please indicate which First Nation: _____

Program Requirements

- 1. Are you 18 or over?**
 Yes
 No
- 2. Are you interested in a long term career in the exploration drilling industry?**
 Yes
 No
- 3. Possessing a valid driver’s license is important for entrance into the program. Do you have a Yukon class 5 driver’s license with a clean driver’s abstract? (Please provide a copy of your driver’s abstract with your resume)**
 Yes *(copy of driver’s abstract attached)*
 No

4. Are you able to work at a fly in/fly out exploration camps (including remote and extreme temperatures) for up to 12 hours per day for periods of 14 or more days in a row?
 Yes
 No
5. Are you in good health, physically fit (lift 50 lbs), and have good vision and hearing?
 Yes
 No
6. Can you provide references verifying a good safety record?
 Yes
 No
7. Can you provide references verifying that you take direction well and work well with others?
 Yes
 No
8. Are you willing to complete drug and alcohol screening prior to training?
 Yes
 No
9. Are you willing to remain clean shaven to comply with reverse circulation drilling worksite safe operating protocol?
 Yes
 No

Education History

What Level or Grade did you last complete? _____

Where and when? _____

Do you currently have Wilderness First Aid? Yes No

If yes, when does your certification expire? _____

What other valid certifications do you have? Please list:

Personal Statement

Why do you want to be accepted into this program?

References

Please list 3 Professional and/or Personal References:

Reference #1	Name: Company: Contact Phone#: Contact Email: How do you know this reference?
Reference #2	Name: Company: Contact Phone#: Contact Email: How do you know this reference?
Reference #3	Name: Company: Contact Phone#: Contact Email: How do you know this reference?

What personal and/or family supports might you need to be successful in this program? (For example, do you have childcare covered/ do you have someone taking care of your home during your absence etc.)

Declaration

I declare the information given by me in this application is true to the best of my knowledge.

Applicant Signature: _____

Date: _____

Thank you for your time in completing this application!

Please email, fax, mail, or drop off your resume to:

admissions@yukoncollege.yk.ca

Office of the Registrar

Box 2799, 500 college Dr.

Whitehorse, Yukon Y1A 5K4

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