

FIRST LINE SUPERVISOR

Application for:

e-COURSE (new applicant)

RENEWAL

Instructions:

- Complete this application in black or blue ink and ensure it is signed.
- Please note that incomplete applications will not be processed.
- Please note that only applications that meet all prerequisites will be processed.
- Please submit this signed application by

email: fls@yukoncollege.yk.ca

Fax: (867) 668-2935

Mail: Centre of Northern Innovation in Mining
Box 2799, 500 College Drive
Whitehorse, YT, Y1A 5K4

Prerequisites

Do you have a current First Aid Certification with CPR?

yes (copy must be attached)

no

Do you have at least 2 years of experience in the industry you will be supervising in? For renewal: 6 months experience in the past 5 years?

yes

no

Which mining industry is your experience in?

underground surface mining

placer mining mineral exploration

other: _____

Applicant Information

First Name: _____ Initial: _____ Last Name: _____

Street Address: _____

City: _____ Terr./Prov.: _____ Postal Code: _____

Tel. (h): (____) _____ - _____ Tel. (w): (____) _____ - _____

Email: _____ Date of Birth: _____ (yyyy/mm/dd)

Employer Information

Job title: _____ Employer website: _____

Employer name: _____ Employer address: _____

Phone number: _____

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Payment Method

- In-person:** cash, debit card, credit card
- Credit card authorization:** Name on card: _____ VISA MC other: _____
Credit card #: _____ Expiry (mm-yy): _____
- I authorize YMTA to charge \$195 FLS e-course fee to this credit card.**
- I authorize YMTA to charge \$40 for FLS renewal processing to this credit card.**
- Cardholder signature: _____ Date: _____

Collection, use and disclosure of participant information

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

Please refer to the Yukon College Information Access and Privacy Protection Policy at yukoncollege.yk.ca for more information on the use of participant information.

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.

Print name

Signature

Date