



**Maritime Environmental Training Institute**  
465 George Street  
Sydney, NS  
B1P 1K5

Telephone: (902) 539-9766  
Fax: (902) 567-1029  
Website: [www.metiatlantic.com](http://www.metiatlantic.com)

## STUDENT APPLICATION FORM

**PROGRAM:** ENVIRONMENTAL HEALTH, AND SAFETY TECHNICIAN

In total, the Program is 18 weeks (38 hours per week) in duration with 670 hours of instruction and hands-on-training. The total cost of the Program is \$8,750. The Program will commence on October 4, 2010 and will run for 19 weeks, due to holidays.

## APPLICANT INFORMATION

**FULL NAME:** \_\_\_\_\_

**ADDRESS:** Street: \_\_\_\_\_

City, Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_

**TELEPHONE:** Home: (\_\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_\_) \_\_\_\_\_

**NEXT of KIN:** Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone#:(\_\_\_\_\_) \_\_\_\_\_

### **EDUCATION:**

Education level of Grade 12 or Mature Student Status (over age 21) is mandatory for this program.

Please indicate last high school attended \_\_\_\_\_ Year \_\_\_\_\_

Graduated: Yes \_\_\_\_\_ No \_\_\_\_\_ Highest Level Completed: \_\_\_\_\_

GED: Yes \_\_\_\_\_ No \_\_\_\_\_

**FINANCIAL INFORMATION:**

Please indicate whether you intend to apply or have made application for any of the following sources of financing:

Canada Student Loan \_\_\_\_\_ Federal Government Services \_\_\_\_\_ WCB \_\_\_\_\_ Other \_\_\_\_\_

**APPLICATION REQUIREMENTS**

I, THE UNDERSIGNED, UNDERSTAND AND AGREE TO THE NOTED:

(A) I UNDERSTAND THAT THIS APPLICATION DOSE NOT GUARANTEE ACCEPTANCE INTO THE INSTITUTDE AND THAT I MUST MEET ALL OTHER ENTRANCE REQUIREMENTS PRIOR TO ACCEPTANCE.

(B) I WILL BE REQUIRED TO COMPLETE A STUDENT CONTRACT UPON ACCEPTANCE/REGISTRATION.

(C) UPON APPLICATION, I WILL PROVIDE TO THE INSTITUTE , THE FOLLOWING:

- (i) A COPY OF MY GRADE 12 TRANSCRIPT OF MARKS AND/OR COPY OF GRADE 12 DIPLOMA OR EQUIVALENT (OR MATURE STUDENT STATUS AS PER GUIDELINES FOR NOVA SCOTIA DEPARTMENT OF EDUCATION).
- (ii) AN UP-TO-DATE RESUME
- (iii) COMPLETED APPLICATION FORM

Signature of Applicant \_\_\_\_\_

Date of Application Submission \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_  
(Applicants under 19 years of age).

Note: APPLICANTS SHOULD ATTACH AN UP TO DATE RESUME OUTLINING EDUCATION, WORK EXPERIENCE AND ANY OTHER INFORMATION THAT MAY BE RELEVANT TO THE SELECTION PROCESS. PLEASE CALL 902-539-9766

**OFFICE USE ONLY**

Date of Application: \_\_\_\_\_

Acceptance Letter Signed By: \_\_\_\_\_

Date Signed: \_\_\_\_\_