Academy of	Fas	hio	n Design	O	ffic	ial A _l	oplica	tio	n Fori	m		
625-B 1st Ave North,	Saskat	oon, S	Saskatchewan,	Cana	ada S	7K 1X7	Phone: 1-3	306-97	78-9088 F	ax: 1-	306-933-9362	
We require the following documents to process your application:						Degistration Fac \$75.00						
Application Form					r	Registration Fee \$75.00 *One time, Non refundable registration fee, Online Applicants Credit Card ONLY.						
Official Transcripts Personal Information- (Please Print)						☐ Credit Card ☐ Cash ☐ Debit ☐ Money Order						
Last Name	ise Print)	First I	Name			Middle N	ame	Sex	Sex Social Insurance Number			
Student Address (Apartment #, Street name, Box Number)				City/Town Provi		Province/S	State	tate Postal/Zip Code Cou		Country		
Birthday (MM/DD/YY) Home Phone ()				Cell (Cell Phone E- mail Address							
Citizenship												
□ Canadian Citizen	□ Pe	ermane	ent Resident –Da	te En	tered	Canada_						
☐ International Student	t											
Next of Kin												
Full Name	Tull Name Relationship											
Address (Apartment #, Str	reet nam	e, Box	lumber) City/To		/Town	n Province/S		State	te Postal/Zip Code		Country	
	Home Phone			Cell	Phone	houé		E- mail Address				
51 11111	()		(
Disability – Can affect acco							ım.					
□Physical Disability	•	,			•							
□ Learning Disability _												
	h aanditi	on that	may affact my part	ioinoti	on 011	ob oo ottor	danaa				_	
☐I have an ongoing health condition that may affect my participation, such as attendance:										-		
Education (Check and prov	ide infori	mation (on all that apply)									
☐ High School Name of School					*:+/ T					Descri	/Ct-t-	
Name of School					ity/Tow	/n				Provir	nce/State	
Academic Level			Diploma Completed:		/ES	□ NO	Fro	m/To (MM/YY)	/		
☐ GED or Adult 12												
Name of School						Town					nce/State	
Name of Program/Academic	Name of Program/Academic Level Comple			YES 🗆 NO				MM/YY)	M/YY) /			
☐ Post Secondary												
Name of School				С	ity/Tow	/n				Province/State		
Name of Program/Academic	Name of Program/Academic Level Co		Completed: ☐ YES ☐			NO From		m/To (m/ To (MM/YY)			
Funding										<u>'</u>		
☐ Student Loans Do you	have prev	vious St	udent Loans? Ye	s 🗆 N	No I	F YES, are	they in good s	standing	g? □ Yes □] No		
			it 🛘 Band Funding		Other							
Program and Registration I			y this form									
Program Start Date (Mo	onth/Yea	ar) :	Т			1						
☐ Certificate of Fashion Design \$75 ☐ First Nations Cultural ☐ Specialized option \$25 ☐ Design Certificate \$75 ☐ Met with advisor to finalize program center												
☐ Diploma of Fashion I	Design S	\$ 75	Design Certifica	aι c ψ	7.5	Met wi	th advisor t	to fina	lize progra	m con	tent: ☐ Yes ☐ No	
Declaration I certify that the information given above is corr this application will result in permanent dismis prosecution. I agree that all documents required Academy of Fashion Design and that they will And regulations of Academy of Fashion Design	sal from the Aca ed for admission not be returned	ademy of Fas to the Acad	shion Design Program and may re demy of Fashion Design become the	sult in crim	ninal	ignature					Date	
FOR OFFICE USE ONLY												
Date Received:												