

APPLICATION FOR ADMISSION



Building Code Training for Canadians

Desired Examination Location	Registration Date		
PERSONAL INFORMATION	SBOA Me	ember: 🗆 Yes 🗆 No	
Name Last Name	First Name		Initial
Address Street or P.O. Box			
	ř		Province
	Phone Home		
Social Insurance Number	Email Add	lress	
EDUCATION BACKGROUND	ı		
Grade Level Obtained		Year	
Grade Level Obtained by	☐ Elementary/High School ☐	ABE □ GED	
-	ance: (please indicate name of Diploma, Cer ☐ Degree ☐ Other	tificate, etc.)	
	as a Building Official?		
Have you received training in the Application If yes, please explain	prenticeship Program? Yes	□ No	
How many years experience do you h	nave as a Building Official?		
FINANCIAL INFORMATION Program Tuition Method of Payment:	Program Material Costs		
☐ Self ☐ Employe	er		
Name & Address of Employer/Spons	or		
	nvoice		
Submit Application form to:	Southeast Regional College P.O. Box 2003 Weyburn, Saskatchewan S4H 2Z9 Phone: (306) 848-2505 Fax: (306) 848-2517 Email: sjenson@southeastcollege.or	ā	
Please make cheques payable to Sout	heast Regional College		
Date	Signature of Applicant		