



GITKSAN WET'SUWET'EN EDUCATION SOCIETY

4125 River Road, Box 418, Hazelton, BC V0J 1Y0

Phone: 250-842-0216 Fax: 250-842-2219

INDIGENOUS HUMAN SERVICES CERTIFICATE PROGRAM 2026-2027

Personal Information (Please print clearly and complete this form thoroughly)

Last Name:	First Name:	Middle Name:
Previous/Maiden Name:	Date of Birth: MM/DD/YYYY	Gender: <input type="checkbox"/> Male or <input type="checkbox"/> Female

Permanent Address:

Address:		
City:	Province:	Postal Code:

Contact Information:

Telephone:	Cell Phone:	Email Address:
	Care Card Number:	PEN (Personal Education Number):

Do you identify yourself as an Aboriginal person: Yes or No
If yes, are you (select one or more): First Nation Status Non-Status Inuit Métis

Band Name/Sponsor (if applicable):	Status Number:
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Proof of Identity—List ID here: (Administration—please photocopy for student records)

IN CASE OF EMERGENCY

Contact Information:

Name:	Telephone:	Relationship:
Name:	Telephone:	Relationship:
Name:	Telephone:	Relationship:

Medical Conditions (if yes, please describe below)

Do you have any allergies or medical conditions:	Do you have any special needs:
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OFFICE USE ONLY

Application Received By: _____ Date: _____
Application Processed By: _____ Date: _____

HIGH SCHOOL EDUCATION

Note: Official high school transcripts must be forwarded from the high school for admission to be granted

School Information:			
Name of School:		City:	Province:
Last year attended: MM/YYYY	Did you graduate: <input type="checkbox"/> Yes or <input type="checkbox"/> No		If yes, Graduation Year:

POST-SECONDARY EDUCATION

Note: Official post-secondary transcripts must be forwarded from the institution for transfer credit to be granted

University or College	From (MM/YYYY)	To (MM/YYYY)	Program

PLEASE NOTE: To avoid unnecessary delays in the processing of your application, please ensure that ALL of your documentation has been submitted along with your completed application package as soon as possible.

PRIVACY CONCERNS: From time to time, the Gitksan Wet'suwet'en Education Society (GWES) may use the names and photographs of enrolled students for marketing and communication purposes. Students with privacy concerns are urged to notify the GWES Systems Administrator when applying for admission.

DECLARATION

I declare that the information I have submitted in this application is complete and correct. Omission of information or falsification of any document submitted may result in the immediate cancellation of admission or registration. Completion of this application permits the institute to request and/or confirm any information necessary to support my application for admission.

I understand that the information provided in this application, as well as other information contained in a student record, is collected under the authority of the college and institution act. All information contained in student records will be protected and used in compliance with the B.C. Freedom of information and protection of privacy act (1992). It may be used for internal administration of admission, registration, grade notification, income tax receipts, awards, institutional research, planning, and other fundamental activities related to being a member of the Gitksan Wet'suwet'en Education Society community.

I understand that this application is a request for admission and does not guarantee admission to any program or course. Admission is subject to provision of all requested documents and assessments, completion of admission requirements, and space availability. If admitted, I agree to abide by the established rules and regulations of the Gitksan Wet'suwet'en Education Society, including those of the program in which I shall be registered.

Signature

Date