Brandon Literacy Council Inc.

Registration Form

Logo

Description automatically generated

Please return completed forms to BLC at 129 - 12th St. Brandon **AND**

be prepared to complete 1-2 hours of initial assessment at that time.

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| Appointment must be made for registration involving special circumstance. Conditions of special circumstance include, but are not limited to:   * Learners under the age of 19 who have NOT graduated high school * Learners dependent on the assistance of a support person/worker * Learners with high school level programming designated as modified (M) or EAL (E)   **BLC does NOT offer EAL programming.**  **You must be at least CLB level 5 and understand instruction in English to attend.**  Please call (204) 729-9964 to schedule an appointment or to inquire about individual circumstances. |

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| **Registration Checklist**  Registrations are only accepted when the following checklist is completely satisfied.   * Official high school transcript (if you have ever attended high school programming) * Government-issued photo ID (driver’s license, passport, military card, status card, etc.) * Completed registration form including writing sample (see reverse) * Initial assessments, completed at time of submission (allow 1-2 hours to complete assessment) |

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| **Personal Information** | |
| Last Name: | First Name: |
| Previous Last Name (if relevant): | |
| Date of Birth (mm/dd/yyyy): | |
| Current Mailing Address: | |
| City/Town: Province: Postal Code: | |
| Phone Number: | Preferred Method of Contact: |
| Email Address: Do you want to be added to our email list? | |
| Canadian Citizen: □ yes □ no If no, date arrived in Canada: \_\_\_\_\_\_ Is English your first language: □ yes □ no | |

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| **Emergency Contact Information** | | |
| Name: | Relationship: | Phone Number: |

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| **K – 12 Education** | | |
| Last School Attended: | | |
| Last Year Attended: | Last Grade Completed: | Graduated: □ yes □ no |
| CLB Level (if applicable): | | |

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| **Other Education (university, college, training programs etc.)** | | |
| Name: | Last Year Attended: | Completed: □ yes □ no |
| Name: | Last Year Attended: | Completed: □ yes □ no |

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| **Learner Goals (Please choose ONE)** | **Within 1 year** | **Within 1-2 years** | **More than 2 years** |
| Improve reading, writing and/or math skills to transition to ALC |  |  |  |
| Improve reading, writing and/or math skills to transition to post-secondary education |  |  |  |
| Improve reading, writing and/or math skills to transition to employment (currently unemployed) |  |  |  |
| Improve reading, writing and/or math skills to transition to employment (cureently employed) |  |  |  |
| Improve reading, writing and/or math skills to transition to training oppportunities |  |  |  |
| Improve reading, writing and/or math skills to enhance participation in community or home |  |  |  |
| Improve reading, writing and/or math skills while working toward a Mature High school Diploma (while attending BLC) |  |  |  |

**Writing Sample -** Tell us about yourself (where you are from, what do you do etc.) and answer the following questions:

* Why are you coming to Brandon Literacy Council?
* What would you like to do in the future?
* Is there anything else about you that would be helpful for us to know?

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