



APPLICANT/STUDENT INFORMATION

| | | | | | | | | | | | |
|-------------------|----------------------|----------------------|----------------------------|--------------------|----------------------|---------------|----------------------|------|----------------------|----------------------|----------------------|
| Last/Family Name: | | | First Name: | | | Middle Name: | | | | | |
| MRU Student ID: | <input type="text"/> | <input type="text"/> | <input type="text"/> | Date of Birth: Day | <input type="text"/> | Month | <input type="text"/> | Year | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Email: | | | Phone (cell): | | | Phone (home): | | | | | |
| Program 1: | | | Program 2 (if applicable): | | | | | | | | |

DECLARATION OF Indigenous STATUS

If you wish to declare that you are an Indigenous person, please specify:

- Status Indian/First Nations
 Métis
 Non-Status Indian/First Nations
 Inuit

Alberta Innovation and Advanced Education collects this information pursuant to section 33(c) of the FOIP Act as the information relates directly to and is necessary to meet its mandate and responsibilities to measure system effectiveness over time and develop policies, programs and services to improve Indigenous learner success.

For further information, or if you have questions regarding the collection activity, please contact the Office of the Director, Business Operations and Reporting, Post-secondary Excellence Division, Alberta Innovation and Advanced Education, 10155-102 Street, Edmonton, AB, T5J 4L5, 780.427.7145 or Admissions and Recruitment, Mount Royal University at 403.440.5000.

In addition to Alberta Innovation and Advanced Education collecting this personal information, the declaration will be used by Mount Royal University for consideration for:

- admission wherever a specific Indigenous target exists
- awarding scholarships and financial awards designated for Indigenous students
- delivery of services for Indigenous students at Mount Royal University

DECLARATION

I certify that I have read and understood all the instructions and information accompanying this form and that all statements made in connection with this declaration are true and complete in all respects. I understand that misrepresentation or withholding requested information are serious offenses which may result in cancelation of admission, registration and/or cancelation of a financial award.

Freedom of Information and Protection of Privacy: The personal information you provide on, or with, this form is collected under the authority of the Post-Secondary Learning Act and the Freedom of Information and Protection of Privacy Act in the Province of Alberta. This information will be used for academic administration, the administration of Mount Royal support services, scholarship and financial aid awards, marketing and recruitment activities and in compliance with data sharing agreements with the Students Association of Mount Royal. Further information is available in the Mount Royal calendar and at mru.ca. Questions can also be directed to Admissions & Recruitment at 4825 Mount Royal Gate, SW; Calgary, AB; T3E 6K6 or by phone at 403.440.5000.

APPLICANT/STUDENT SIGNATURE: _____

DATE: _____

OFFICE USE ONLY

| | | |
|-----------------------------------------|-------------|-------------|
| <input type="checkbox"/> Record updated | Name: _____ | Date: _____ |
|-----------------------------------------|-------------|-------------|

RETURN THIS FORM TO ADMISSIONS AND RECRUITMENT.

4825 Mount Royal Gate SW • Calgary, Alberta • T3E 6K6 • Fax: 403.440.6339 • Email: aro@mtroyal.ca