

COLLEGE OF THE NORTH ATLANTIC PROGRAM COST FORM

CNA is an educational body of the Government of Newfoundland and Labrador. CNA is, therefore, subject to the Access to Information and Protection of Privacy Act (ATIPPA). Learner Services is collecting your personal information to confirm your enrolment, which you will forward to your Funding Agency to assist in processing your application for financial assistance. It will only be used for this purpose. This personal information is collected under the authority of the College Act, 1996 (SNL1996 CHAPTER C-22.1). All personal information will be stored in accordance with our normal network and information security measures. Personal information will only be disclosed as required to do so by law. For further information about the collection and use of this information please contact the Registrar at 709-643-0827. For more information about the ATIPPA please visit www.cna.nl.ca/about/atippa.asp.

The purpose of the Program Cost Form is to provide the necessary program and cost information to assist the student with his/her application for financial assistance. This form must be completed by an official of the educational institution. Completion of this form constitutes confirmation of acceptance into the program of study and verification of costs associated with the program. Please ensure all sections of this form are completed and signed in INK.

This is to Certify:

1. That _____ is
(Applicant's Name) (Student Number) (Social Insurance Number)

accepted as a full-time student in the following program of study: PLUMBER

at our BONAVISTA campus.

2. That the applicant will be registering in the _____ (1st, 2nd, etc.) year of a _____ (total # of mos/yrs) Year program

3. The total number of weeks in the entire program is 37 weeks.

4. Upon completion of the Course of Study as described above, the applicant will be awarded a (Level of Study):

Certificate Diploma Other (specify) _____

5. That the applicant's period of study by semester for this current academic year is as follows:

Semester Number	Semester Start Date	Semester End Date	No. of weeks	% of full course load	Tuition Costs	Book Costs	Compulsory Fees	Supply Costs	Health & Dental Fees	Paid Work Term
Fall	05-Sept-17	21-Dec-17	16	100	\$726.00	\$1400.00	\$482.00	\$900.00	\$390.00	No
Winter	02-Jan-18	26-Apr-18	17	100	\$726.00		\$210.00			No
Intersession	30-Apr-18	28-May-18	4	100	\$196.00		\$56.00			No

NAME AND ADDRESS OF INSTITUTION:

College of the North Atlantic, Bonavista Campus, 301 Confederation Dr. P.O. Box 670, Bonavista, NL, A0C 1B0, www.cna.nl.ca

SCHEDULED HOLIDAYS FOR 2017-2018: October 6, October 9, November 13, Christmas Break from December 22– January 1, February 2, February 5, Reading Break from March 5-9, March 30, May 21

Date

Name of Official (Please Print)

Signature of Official

Telephone Number

Fax Number

E-Mail Address

Supplies:

→Hard hat (CSA Z94.1-05 Type 2); steel toe safety boots (CSA Z195-2); safety glasses (CSA Z94.3, Class 1); coveralls (CAS Z96-09 Class II Level II 100% Cotton); safety vest; knee pads
→hack saw; hand files (assorted); aviation snips (straight); hex keys; utility knife; torpedo level; measuring tape (metric/imperial); pipe wrench (10"-14"); assorted pliers (channel locks #8); hand held propane torch; scale rule (metric/imperial); assorted screwdrivers; crescent wrenches (8" and 10"); face shield; waterproof flashlight