

## 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). Student 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](http://www.cna.nl.ca/about/atippa.asp). **All fees and dates are subject to change without notice.**

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: **Hairstylist** at our **Gander** campus.

2. That the applicant will be registering in the **1<sup>st</sup>** (1<sup>st</sup>, 2<sup>nd</sup>, etc.) year of a **1 YR** (total # of mos/yrs) program.

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

Certificate       Diploma       Other (specify) \_\_\_\_\_

4. 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	04-Sept-18	20-Dec-18	16	100	\$726.00	\$400.00	\$482.00	\$1200.00	\$381.00	
Winter	02-Jan-19	26-Apr-19	17	100	\$726.00		\$210.00			
Intersession	29-Apr-19	25-Jun-19	8	100	\$392.00		\$112.00			

NAME AND ADDRESS OF INSTITUTION:

College of the North Atlantic  
Gander Campus  
P.O. Box 395  
1 Magee Road  
Gander, NL A1V 1W8  
[www.cna.nl.ca](http://www.cna.nl.ca)

#### SCHEDULED HOLIDAYS FOR 2018-2019:

October 5, October 8, November 12,  
Christmas Break from December 21– January 1,  
February 1, February 4,  
Reading Break from March 4-8, April 19  
May 20, June 24

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Official (Please Print)

\_\_\_\_\_  
Signature of Official

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Fax Number

\_\_\_\_\_  
E-Mail Address