



Discovery University Winter 2018 Application

PLEASE PRINT CLEARLY

Note: The fields on all **4 pages** of this application are mandatory. Incomplete applications will impact your eligibility into the program. Classes will commence January 26th and end on March 30th 2018.

Date:

Name: (last name)

Name: (first and middle names)

Please select the course of interest:

Letters from Winters of Yesteryear (Fridays 2:30-4:30 PM)

Leadership studies (Fridays 12:00-2:00 PM)

Psychology of Performance (Fridays 9:30-11:30 AM)

Address:

City:

Province:

Postal Code:

If you have no permanent address, please list the agency where you are staying, or where you can be contacted, or by whom:

Phone (day):

Phone (night):

E-mail:

Preferred method of contact:

E-mail

Canada Post

Both

Gender:

Date of Birth (MM/DD/YYYY):

EDUCATION

Highest level of education completed (Please indicate the grade or course you took):

Grade

College

University

If you did not complete your schooling, please explain why?:

ADDITIONAL INFORMATION

How do you plan on attending both class and discussion groups? (This does not determine your eligibility into the program)

I have a monthly bus pass

I have bus tickets

Other _____

I need assistance with attending DU programming

Would you like library access for the University of Ottawa?

Yes

No

Would you like a computer and/or wireless access at the University of Ottawa? (You will need an e-mail address to have access):

Yes

No

Are you comfortable speaking and writing in English?:

Yes

No

Can you commit to 5 - 7 hours per week of study? This includes attending 2 hours of lecture, 1.5 hours of discussion group time and completing the assigned readings.

Yes

No

If possible, would you prefer to be in a discussion group with individuals of your same gender:

Yes

No preference

Will you attend the meals provided prior to the discussion group?

Yes

No

Please indicate any food allergies (and/or if you require a vegetarian meal):

How did you hear about Discovery University?

Can we tell others that you have applied for this course?

Yes

No

Is this your first time applying to Discovery University?

Yes

No

If not, how many Discovery University courses have you taken?

For statistical purposes, we are collecting data on our student's source of income. If you are willing to share this information, please state your source of income in the space provided. (eg. Ontario Works, ODSP, pension, etc.)

Source of Income

WRITTEN STATEMENT

Please write one or two paragraphs explaining why you would like to be a student in the Winter 2018 term. Please note that this writing will be used to evaluate your literacy level as well your enthusiasm for the course material. Both first time and repeat students are required to submit a written statement.

Please use the space below for your written statement.

PROFESSIONAL REFERENCE

For new students, you must submit a professional reference. References must be a professional who knows you well, such as a counselor, agency supervisor, clergy, doctor or case worker. We understand that this information gives us permission to speak with your reference. Please let this person know that you have given us their name and permission to ask about you.

Reference Name:

Reference Phone #:

Reference Fax #:

Reference's Relationship to You:

Completed applications must be returned no later than Friday January 12, 2018 to: Discovery University, The Ottawa Mission, 35 Waller St. Ottawa, ON K1N 7G4

Tel: 613-914-4575 Fax: 613-234-2813

The organizations involved in planning this program are committed to protecting your privacy and maintaining your confidentiality. By signing you are giving consent to allow The Ottawa Mission to use the information collected, ie. your gender, age, education, source of income, and interests for statistical and evaluation purposes only. Any information that reveals parts of your identity will NOT be used.

Signature:

Date: