

Citizenship

Please indicate country of citizenship: _____

Indicate the status you will have while in Canada

- Student Visa
- Visitor Visa
- Other: _____

When are you planning to enter Canada? (DD/MM/YYYY) _____

Would you like to self-disclose that you are:

- of Aboriginal Descent
- of African-Canadian Descent

Privacy Act Disclaimer

At the request of the Maritime Provinces Higher Education Commission (MPHEC) and Statistics Canada, Mount Saint Vincent University includes the following information regarding the disclosure of personal information to these bodies:

“Under the federal Privacy Act, individuals can request access to their own, individual information held on federal information banks, including those held by Statistics Canada.

Students who do not wish to have their information used are able to ask Statistics Canada to remove their identifying information from the national database.”

Mount Saint Vincent University abides by the Personal Information Protection and Electronic Documents Act (PIPEDA) and the Freedom of Information and Protection of Privacy Act (FOIPOP). For further information, consult the Academic Calendars.

Student Authorization

By signing this form, I acknowledge access (hard copy or web based) to the Academic Calendars and I hereby agree to abide by all University regulations and policies as contained herein including any revisions, deletions or additions made to them in the future.

Student's Signature (Required)

Date