

PORTAGE LEARNING & LITERACY CENTRE

110 Saskatchewan Avenue West Portage la Prairie, Manitoba R1N 0M1 Telephone: 204-857-6304 Fax: 204-857-6358 E-mail: info@pllc.ca Website: www.pllc.ca

Registration for Adult Learning

Date:					
A. <u>General Information:</u>					
Name/////					
First Name Middle Name	Last Name				
Previous Name, if any:					
Birthdate: (day/month/year)		-			
I identify my gender as:					
Address:or Bo					
////////////////////////////////////////////////////////////////////////////////_/					
Town/CityProvincePostal CodeContact Information:					
Home Phone Cell Phone					
E-mail address					
Preferred Way for us to contact you (Check one): Home phone Cell Phone Text E-mail					
Emergency Contact: Name: Relationship:					
Phone number:					
B. <u>Learner Profile</u> I am: (Check all that apply): or Not applicable					
A single parent of child(ren) under the age of six					
A newcomer to Canada (arrived in the last 5 years)					
First Nation Metis Inuit Other Indigeno	ous				
Language: or Not applicable					
The <u>first language</u> that I learned was an Indigenous la					
English is an additional language (<i>excluding Indigenous languages</i>). List additional languages:					
If you require childcare while attending class, please fill out this section:					
1. Child's Name:	Birthdate:				
2. Child's Name:	Birthdate:				
3. Child's Name:	Birthdate:				
Office use only: Assessment: Intake:					
Placed on Waitlist New Returning Literacy M12 PDC					
Start Date:					

C. <u>Employment Status</u>: (Check only one)

	I am receiving Income Assistance (EIA). Name of	of Case Coordinator:			
	I am receiving Employment Insurance (EI)	I receive Workers Compensation Benefits (WCB)			
	I am on long-term disability	I receive a band-funded allowance			
	I am employed full-time (30+ hours/ week)	I am employed part-time (less than 30 hours/ week)			
<u>If y</u>	you are unemployed: I <u>am not employed</u> , but I am (check one): actively se	eking work, or not actively seeking work.			
D.	Education Background				
	The last time I attended high school was (check one): W5 years or lessbetween 6 – 10 years agmore than 20 years ago				
	The highest grade I completed in high school was (chec less than grade 8 grade 8 or grade 9 grade 12 graduate (in Canada or international)	k one): grade 10 or 11			
	The name of the last school (not university/college) I attended was:				
	Have you ever attended an Adult Learning Centre? Y If yes, what year did you last attend? What is the name of the ALC you attended? I have a General Educational Development (GED): Y				
E.	 Learner Goal: Check your main reason for wanting to return to school. Select one only: to move on to Mature 12 courses to move on to College or University to find better employment (currently employed) to attend a training program to enhance participation in the community/ home to assist with Independent Study Option courses to prepare for GED for any other purpose that is not listed above – describe: 				
	My long term goal is:				
F.	Technology: I have the following technology for school uSmart phoneTablet/iPadLaptop				
G.	Freedom of Information and Protection of Privacy Act : The information that you provided is voluntar and confidential. It will be used and disclosed for the purpose of determining learner demographics a required by provincial authorities, to assess your suitability for our programs, and for the enhancemen of employment and education programming.				
	Completed by:				
	Print name				
	Signature	Date			