

**Personal Information and Protection of Privacy**

The information requested on this form is collected under the authority of the *Memorial University Act (RSNL 1990 c M-7)* and is needed to assign your Marine Institute identification number; to process your application for admission; to verify your qualifications and determine your eligibility for admission; for administration of student records, scholarships, and awards; for provision of student and alumni services; and for institute planning and research. Upon registration at Marine Institute, this information will form part of your student record and will be used to document your progress in an academic program. Students' personal information may be disclosed to academic and administrative units; to donors or representatives of institute-administered scholarships/bursaries/awards; to federal and provincial agencies as legally required; to student governance associations; to high school or post-secondary institution contacts as necessary to provide new and transfer applicants with appropriate academic advice; and to private health insurance provider(s) as necessary to administer the applicable student health insurance program. For details on the use and disclosure of students' personal information, please contact the Registrar at (709) 778-0497.

## Growing the Canadian Aquaculture Workforce of the Future Enrolment Form

### Certificate in Aquaculture Safety

Please complete all areas of this application and return to the Marine Institute.

#### Growing the Canadian Aquaculture Workforce of the Future:

Applicants must submit this application for any field training courses as part of the Growing the Canadian Aquaculture Workforce of the Future.

|  |                             |                     |               |
|--|-----------------------------|---------------------|---------------|
| <b>Name:</b>                                 | <b>CDN:</b>                 |                     |               |
| <b>Mailing Address:</b>                      | <b>Date of Birth: (Day)</b> | <b>(Month)</b>      | <b>(Year)</b> |
| <b>PO Box:</b>                               |                             |                     |               |
| <b>Street:</b>                               |                             |                     |               |
| <b>City:</b>                                 | <b>Province:</b>            | <b>Postal Code:</b> |               |
| <b>Phone Number:</b>                         |                             |                     |               |
| <b>Email Address (please print clearly):</b> |                             |                     |               |
| <b>Next of Kin Information:</b>              |                             |                     |               |
| <b>Name:</b>                                 | <b>Phone Number:</b>        |                     |               |

Please select the courses under the Certificate in Aquaculture Safety you are registering for and submit this form along with a resume that outlines education and work experience in aquaculture.

|   |   |
|---|---|
| <b>Certificate in Aquaculture Safety Courses:</b>                                 |   |
| <input type="checkbox"/> Small Vessel Operator Proficiency Course (SVOP)          | <input type="checkbox"/> Restricted Operator's Certificate - Maritime Commercial (ROC-MC) |
| <input type="checkbox"/> Small Non-pleasure Domestic Vessel Basic Safety (SDV-BS) | <input type="checkbox"/> Marine Basic First Aid (MBFA)                                    |
| <input type="checkbox"/> Aquaculture Health & Safety                              |   |

#### Admissions Requirements:

Applicants shall possess aquaculture industry experience acceptable to the admissions committee and have a senior high school Grade 12 Graduation Certificate; a Grade 11 Public Examination Matriculation Certificate; a Level III Adult Basic Education (ABE) Certificate; other qualifications meeting Department of Education requirements or high school equivalency; or be eligible for entry under mature status.

Mature applicants must be 21 years of age or older within one month of the start of the program and are required to demonstrate that they gained educational, technical or practice expertise, in aquaculture industry. Mature applications must provide the following documentation: resume, letter of recommendation from an employer, official education transcripts, proof of age, and a letter requesting special consideration.

**If you have previously obtained certificates for ROC-MC, SVOP, SDVBS, and/or MBFA, we kindly request that you include a copy of the certificate(s) along with your resume and application form. This will enable us to assess your qualifications and determine if you are eligible for program certification based on your completion of specific courses.**

#### Student Declaration:

I hereby declare that I have disclosed all required information fully and accurately. If accepted as a student, I agree to participate in all training activities. I further agree to abide by all Institute rules and regulations and understand that if I fail to do so, I will forfeit the privilege of remaining a student.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Submit completed form and resume via email: [aquaculture@mi.mun.ca](mailto:aquaculture@mi.mun.ca) OR fax: (709) 778-0535

Fisheries and Marine Institute Memorial University of Newfoundland

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