

Important Information

- The Atlantic Trades Business Seal (ATBS) program is supported by Nova Scotia Apprenticeship Agency (NSAA) and the Nova Scotia Community College (NSCC).
- You **must hold** a Certificate of Qualification in a designated skilled trade in order to be accepted into the program.
- This form is **not an acceptance** into the offering of the ATBS program. You may be contacted for further information as required.
- **To Apply:** Please submit this application form with a personal statement/letter of intent outlining:
 - 1. Your education and work history;
 - 2. Your reasons for applying to this program; and
 - 3. Your expectations about how it will enhance your learning and career opportunities
- Please forward the completed application form and personal statement/letter of intent to apprenticeship@novascotia.ca. You will be contacted regarding your application status.

Section I - Applicant Information

Trades Certificate of Qualification number:

Name	First	Initial	Last
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Address

Phone	Email
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Is it your intent to take all 5 of the ATBS courses/modules? Yes No

If no, which courses/modules do you intend to take?

Section II – Certificate of Qualification

Certificate of Qualification obtained in what trade:	When was it obtained?
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In what province was it obtained?

Were you previously a NSCC student? Yes No

Program and year it was taken:

Section III – Self-Identification Section

NSCC and NSAA are committed to fostering a diverse college culture and community. Completion of all or part of this section is voluntary.

Do you self-identify as an Aboriginal/Indigenous person? Yes No

Do you self-identify as a member of the African Canadian Community? Yes No

Do you self-identify as a person with a disability? Yes No

Do you self-identify as a woman in the skilled trades? Yes No

Do you identify as an Immigrant/Newcomer to Canada? Yes No

Section IV – Authorization

I certify that the foregoing information is accurate and correct to the best of my knowledge. I understand that NSCC and NSAA will collect, use, and disclose my personal information in a confidential manner that is consistent with the operation of a post-secondary institution. My consent is conditional upon NSCC and NSAA complying with their legal duties and obligations to manage the collection, use, and disclosure of personal information.

Applicant Signature

Date