

University nuhelot'ine thaiyots'ı nistameyimâkanak Blue Quills

NEW ENROLMENT CHECKLIST
Health Care Aide Program

PROGRAM: _____ **SESSION:** _____ **YEAR:** _____

- ✓ **Blue Quills Application Form** _____

- ✓ **Blue Quills \$100.00 Application Fee** If Applicant is returning to
same program – fee is
waived _____

- ✓ **Official Transcripts** _____

- ✓ **Testing: Date Scheduled:** _____

- ✓ **Letter of Interest** _____

- ✓ **Three (3) Letters of Recommendation** (1) _____
(2) _____
(3) _____

- ✓ **Interview with Coordinator (_____)** _____
Coordinator's Name

- ✓ **Sponsorship Confirmation** _____

- ✓ **Acceptance Letter** Full Conditional Probation _____

COMMENTS:
