



**Diploma in Intellectual Disability Studies**  
 Continuing & Distance Education, St. Francis Xavier University  
 P. O. Box 5000, Antigonish, NS B2G 2W5  
 Tel: (902) 867-4696 or Toll Free: 1-866-551-7575  
**Fax: (902) 867-5154**  
 E-mail: [inds@stfx.ca](mailto:inds@stfx.ca)

**DIPLOMA IN INTELLECTUAL DISABILITY STUDIES**  
**WINTER TERM COURSE REGISTRATION**

Return this form with payment to the address above. Cheques to be made payable to St FX University

**StFX Student ID #** \_\_\_\_\_

**Please Print**

Last Name	Full First Names

**Date of Birth:** (required for identification in Registrar's records only) (Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_)

**Address for receiving course material: (Please print)**

Mail/Courier Address	Town and Province	Postal Code
Home Phone #	<b>Personal E-Mail Address (print clearly)</b>  (Access details for discussions/course resources will be emailed to personal email approximately four days before term begins).	
Work Phone #		
Cell Phone #		
Do you require a receipt* for tuition paid? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Please indicate your choice for this term:</b> <input type="checkbox"/> <b>INDS 120 Relationships, Advocacy &amp; Vision</b> <input type="checkbox"/> <b>INDS 140 Building Community</b>	<b>OFFICE USE:</b> Tuition Payment _____ Date received _____	

Date: \_\_\_\_\_ **Signature of Applicant:** \_\_\_\_\_

Tuition is \$515 (subject to change at the discretion of the University). Cheques/money orders must be made payable to St. F. X. University and mailed to the Program Office at the address above. Participants outside of Canada should contact the program office for current fees.

\* Official receipts for tax purposes are issued by the Business Office at the end of February for courses taken the previous year.

<b>Office use only</b>		
<input type="checkbox"/>	Acknowledgement of registration emailed	(Day _____ Month _____ Year _____)
<input type="checkbox"/>	Requested receipt issued	(Day _____ Month _____ Year _____)
<input type="checkbox"/>	Campus Store instructions emailed	(Day _____ Month _____ Year _____)
<input type="checkbox"/>	Blackboard access emailed to participant	(Day _____ Month _____ Year _____)