

CONFIRMATION OF STUDENT'S FULL-TIME STATUS



This document must be completed and stamped by the Registrar's Office

=	Student's name:		
2	School:		
0	Faculty / Program:		
This student has semester(s):	s completed and is registered as a FULL-TIME student	in the above faculty / p	program for the following
•	FALL semester 2018 - September to December	yes no _	
•	WINTER semester 2019 - January to April/May	yes no _	
•	Other		
	registered for the FALL Session 2019 to complete the _		years in the following
Example: Th	is student is registered for the FALL Session 2019 to complet	e the 2 nd year of the 4 year.	s in the following program.
_	Registrar's Signature and Stamp	Date	
	Student's Commitme I submit that it is my intention to continue my sto not to continue my studies or if I am unsuccessful in my I Ore Company of Canada as soon as this information is m so will result in my termination from this s	udies in September of 202 last semester, I understar ade available to me. I an	nd it is my responsibility to
	Student's signature	Date	
	To Be Completed by Student Ap	oplicant:	
	I wish to work for the period of May 06 to August 27 I wish to work for the period of May 13 to August 27 I wish to work for the period of June 10 to August 27 Are you available to work after August 27? If yes, until when? (Last possible date September 10)		

Completed form must be returned to your local Human Resources office prior to April 26, 2019:

Student Recruitment Human Resources

Iron Ore Company of Canada P.O. Box 1000, Labrador City, NL A2V 2L8