NEW BRUNSWICK ASSOCIATION OF PRIVATE COLLEGES & UNIVERSITIES (NBAPCU)

1070 Saint George Blvd. | Moncton, NB | E1E 4K7 t: 506-856-5166 x7019 www.nbapcu.com

&

NATIONAL ASSOCIATION OF CAREER COLLEGES (NACC)

44 Byward Market, Suite 270 | Ottawa, ON | K1N 7A2 t: 613-800-0340 | f: 613-789-9669 www.nacc.ca

APPLICATION FOR MEMBERSHIP

SECTION A – Organization Information

We hereby apply for membership in the New Brunswick Association of Private Colleges & Universities and the National Association of Career Colleges and in so doing, agree to follow and adhere to all Bylaws and Code of Ethics which presently exist, or may in the future be provided by both the provincial and national associations.

Name of College:			
Street Address:			
City:	Province:	Postal Code:	_
Telephone:	Facsimile:		
Website:			
Each campus will be require	ed to register and will be a	separate voting member of the associ	ation
Please indicate:			
Year of Founding:			
Name of Owner, Director or S	Senior Manager:		
Email of Owner, Director or S	Senior Manager:		
Phone Number of Owner, Di	ector or Senior Manager:		
Name of Official Representate above):	·	ferent from the owner, director or senior r	manage
Email of Official Representat	ve to NBAPCU/NACC:		
Phone Number of Official Re	presentative to NBAPCU/NA	CC:	

SECTION B – PCC Registi	ration Information		
Is your College currently req Yes No		Occupational Trainin	g Act?
SECTION D - NACC Servi	ces		
Will you be using the NACC of the state of t		& Examination Service	es? YesNo
Early Childcare Assistant	Personal Support Work	erEsthetics	Pharmacy Assistant
SECTION E - MEMBERSHIP	PFEE		
Private Career College - \$7 Private University - \$725 Allied Member - \$725	25 includes NACC membe	ership	
Please make cheque payab Any NSF cheques will be cha		sociation of Private	Colleges & Universities.
Once you have completed th	is form please send your a	application and paym	ent to:
New B	runswick Association of Pi 1070 Saint G Moncto E1E	eorge Blvd. on, NB	Jniversities
Declaration	EIE	41(7	
"I certify that the information knowledge. I understand that termination of membership of our premises and/or cour Universities representative,	at the provision of false inf in the associations in mak se offerings by a New Bru	ormation could result ing this application, I nswick Association o	in denial or suspension or hereby agree to an inspection
Dated thisD	ay of	,	
Signature			Title
For Office Use Only:			
Date Received	ı	Received by	
Date Approved for Memb	ership		