

**Nunatsiavut Government - PSSSP
Student Address and Course Confirmation Form**

Student Name: _____	Program: _____	
Institution: _____	Student #: _____	
Student's Mailing Address _____ _____ _____ Postal Code: _____	Living arrangements: <input type="checkbox"/> renting/boarding <input type="checkbox"/> with employed parent(s) <input type="checkbox"/> with unemployed parent(s) <input type="checkbox"/> campus residence <input type="checkbox"/> own home	Current Semester: <input type="checkbox"/> Fall (Sept-Dec) <input type="checkbox"/> Winter (Jan-April) <input type="checkbox"/> Spring (May-Aug) <input type="checkbox"/> Intersession (May-June) <input type="checkbox"/> Summer (July-Aug)
Telephone Number: (_____) _____ (Area Code)	Alternate Phone Number: (_____) _____ (Area Code)	
E-mail Address: _____		
Registered Courses for the Current Semester/Session (list course name & number):		
_____	_____	_____
_____	_____	_____
_____	_____	_____
Signature: _____	Date: _____	



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