



Nunatsiavut Government – EDUCATION DIVISION

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Student Address & Course Confirmation (SACC) Form

****Do not submit this form until after first day of classes has started****

Student Address:

Student Name: _____	Program: _____
Student #: _____	Institution: _____
Living Arrangements (while in training): Check one box per semester:	Mailing Address (while in training):
<input type="checkbox"/> renting/boarding	_____
<input type="checkbox"/> living with parents	City/Town: _____
<input type="checkbox"/> campus residence	Province: _____
(Please attach Statement of Account)	Postal Code: _____
<input type="checkbox"/> own home	
Primary Email Address: _____	Phone #: _____

Course Confirmation

Please list all registered courses, course number and credit value for the current semester or attach course list from institution.

Current Semester (check one box per semester):

Fall (Sept-Dec) Winter (Jan-Apr) Spring (May-Aug) Intersession (May & June) Summer (Jul-Aug)

Work Term (Paid Unpaid)

Course Name, Number and credit value:

Ex: MATH 1090 (3)

1) _____	<input type="checkbox"/> On-campus <input type="checkbox"/> Online
2) _____	<input type="checkbox"/> On-campus <input type="checkbox"/> Online
3) _____	<input type="checkbox"/> On-campus <input type="checkbox"/> Online
4) _____	<input type="checkbox"/> On-campus <input type="checkbox"/> Online
5) _____	<input type="checkbox"/> On-campus <input type="checkbox"/> Online

Signature: _____

Date: _____

For Office Use Only:	
Verified by: _____	Date: _____
Entered by: _____	Date: _____
Funding Allocation: Tuition/Childcare: <input type="checkbox"/> PSSSP <input type="checkbox"/> ISETP (<input type="checkbox"/> EI <input type="checkbox"/> CRF) <input type="checkbox"/> IPSE	
Remaining Supports: <input type="checkbox"/> PSSSP <input type="checkbox"/> ISETP (<input type="checkbox"/> EI <input type="checkbox"/> CRF) <input type="checkbox"/> IPSE	