



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: _____
Year of Study: ____ of ____	Start date: _____ End Date: _____
Living Arrangements (while in training): Check one box per semester:	Mailing Address (while in training): _____
<input type="checkbox"/> renting/boarded	City/Town: _____
<input type="checkbox"/> living with parents	Province: _____
<input type="checkbox"/> campus residence	Postal Code: _____
(Please attach Statement of Account)	
<input type="checkbox"/> own home	
Primary Email Address: _____	Phone #: _____

Course Confirmation

Please list all registered courses, course code and credit value for the current semester.

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) Other _____ to _____

Course Name, Code and credit value: E.g.: MATH 1090 (3)

Name	Course Code	Credit Value	On campus	Online
E.g. Math	1090	3	Yes	

**If you are registered for more than five courses, please attach a full course list.*

*Student Signature: _____ Date: _____

For Office Use Only:

Verified by: _____ Date: _____

Entered by: _____ Date: _____

Funding Allocation: Tuition/Childcare: PSSSP ISETP (EI CRF) IPSE

Remaining Supports: PSSSP ISETP (EI CRF) IPSE