R	e français en milieu (egistration Form - 1 2 /INTER 2019 (19H)	*I Nove	Register before ember 15 th and you	San fran	té en içais	Université de Saint-Boniface Division de l'éducation permanente	
	lease fill out form and then pr		uld win back your or a stration fee.	IMPORTANT NO	TICE: Classes s	tart the week of January 7 th ,	
Santé en français offers these courses through			\sim	<u>2019</u> . Most classes are offered at Université de Saint-Boniface			
	Université de Saint-Boniface's Continuing Education Divisio			(USB). Alternate locations may be used if necessary.			
	Former Student – Last level		SEND COMPLETED APPLICATION FORM and REGISTRATION FEE TO: French Language Services, A1153 – 409 Taché Ave. R2H 2A6				
New Student – Telephone number where we can react for a placement interview:			n reach you	no later than <u>Tuesday, November 20th.</u> \$50 fee to be incurred by the student.			
Ρ	Please check your answers:			Cheques payable to Santé en français			
Yo	Your position is: 🗌 permanent 🔲 term: dates of term			🗌 full-time 🗌 part-time 🛛 If PT, EFT			
Yo	our position is designated bilingua	program is designated bilingual 🗌 yes 🔲 no					
You are in direct contact with: 🗌 patients 📄 residents 📄 clients 📄 the public 📄 other							
By registering for this course, I consent to the Division de l'éducation permanente's sharing information with WRHA French Language Services about my enrolment status, my presence in class and my final results. *All classes will be held at the Université de Saint-Boniface*							
	Beginner 1	MONDAYS*	January 7 to March * no class on February 1	า 18	5 pm – 8:1	5 pm	
	Beginner 2	THURSDAYS	January 10 to Mar		5 pm – 8 p	m	
	Beginner 3	TUESDAYS	January 8 to March	n 19	5 pm – 8 p	m	
	Beginner 4	WEDNESDAYS	January 9 to March	า 20	5 pm – 8 p	m	
	Intermediate 1	THURSDAYS	January 10 to Mar	ch 21	5 pm – 8 p	m	
	Intermediate 2	MONDAYS*	January 7 to Marcl *no class on February 18		5 pm – 8:1	5 pm	
	Intermediate 3	TUESDAYS	January 8 to March	n 19	5 pm – 8 p	m	
	Intermediate 4	WEDNESDAYS	January 9 to March	า 20	5 pm – 8 p	m	
	Avancé (Passages dans le temps)	TUESDAYS	January 8 to March	า 19	5 pm – 8 p	m	
	Perfectionnement (À votre avis)	WEDNESDAYS	January 9 to March	n 20	6 pm – 9 p	m	
	Perfectionnement (Grammaire et communication : Vers un mo	THURSDAYS nde meilleur)	January 10 to Mar	ch 21	6 pm – 9 p	m	
Last	name Firs	t name	Home phone num	ber Work ph	one number	Cell phone number	
Address		City/Province Postal coc		ode			
Personal e-mail address		Work e-mail addre	ess				
PLEASE CHECK YOUR E-MAIL REGULARLY AS COURSE CONFIRMATIONS WILL BE SENT BY E-MAIL.							
Please be sure to check your "junk e-mail" folder as sometimes a new email address can be tracked as spam. I HAVE READ AND UNDERSTAND THE INFORMATION SHEET PROVIDED BY SANTÉ EN FRANÇAIS							
					(si	gnature)	
Place of employment:			Occu	pation:			
Your	r signature:		Date	:			

Name of your workplace manager or supervisor: _____

This personal information is being collected under the authority of *The Université de Saint-Boniface Act*. It will be used for the purposes of administering *Le français en milieu de santé* and *Telehealth* programs. It will not be used or disclosed for other purposes, unless permitted by the *Freedom of Information and Protection of Privacy Act* (FIPPA). If you have any questions about the collection of your personal information contact the FIPPA/PHIA Coordinator's Office (204-237-1818, extension 398), Service des archives de l'Université de Saint-Boniface, 200 De la Cathédrale Avenue, Winnipeg, MB R2H 0H7.





French Language Training **(FMS)** Winter 2019

INFORMATION SHEET

The objective of the program is to develop employees' linguistic abilities and to encourage them to apply for and work in a designated bilingual position in order to ensure quality services in French in Manitoba.

CRITERIA

To be eligible for French-language training for *Français en milieu de santé*, employees must:

- Be employed in a designated position, facility, program or department;
- Be employed in a permanent position or employed in a term position for more than 1 year;
- Be employed in a position that has direct contact with patients, residents, clients or the general public;
- Be committed to actively participate in a minimum of 24 hours of the 33 hours required per session regarding French-language training in order to achieve bilingual status.

REGISTRATION

- French language courses are provided free of charge by SANTÉ EN FRANÇAIS;
- A non-refundable deposit of \$50 is required from every registrant to cover administration and coordination fees;
- Cheques are payable to SANTÉ EN FRANÇAIS;
- A surcharge of \$20 will be added to all NSF cheques.

PROCEDURE

- Eligible employees should fill out a registration form, sign the "information sheet" and submit it to their FLS coordinator or contact person along with their \$50 cheque prior to the deadline;
- The coordinator or contact person will forward student registration forms, signed "information sheets" and deposit cheques to SANTÉ EN FRANÇAIS. Please do not forward these directly to the language training facility.
- The language training facility will contact learners by e-mail to confirm course particulars such as start date, time and location approximately one to weeks prior to course start date.
- In order to be eligible to win the draw offered to those who register early, SANTÉ EN FRANÇAIS needs to receive the registrations with payment before midnight on the cut-off date indicated on the form. Further details regarding the draw can be found on the Official Rules document available from SANTÉ EN FRANÇAIS.

ACCESSIBILITY

- This document available in alternate formats upon request.
- Please let us know if you require an accessible classroom or other accommodations to remove barriers to participation.

CONSENT

By registering for this course, I consent to Santé en français and Université de Saint-Boniface sharing information about my enrolment status, my presence in class, and my final results with my employer.

For students participating via Telehealth or Adobe Connect:

I authorize the Coordinator to give my information (phone number and e-mail) to the Telehealth representative in order to plan the technical logistics regarding the course.

Signature: _____

Date: _____

Important contacts:

REGISTRATION INFO (Registration Questions) Lise Alcock (204) 235-3986 COURSE COORDINATION (Missed class, content, questions & concerns) **Kristopher Noseworthy, Université de Saint-Boniface** (204) 237-1818, ext. 495