

Course to be taken: _____ Starting date: _____

Name: _____ M ___ / F ___
(Please print) Last Name (Family Name) First Name(s) Other Name

Address: _____ Telephone: _____

(Current) _____ Date of Birth (YYYY/MM/DD): _____

City: _____ Emergency Contact: _____

Province: _____ Emergency Contact Phone #: _____

Postal Code: _____ Alberta Health #: _____

Email (Please Print): _____

Marital Status: Single ___ Married ___ Separated ___ Divorced ___ Widowed ___

Status: (a) Canadian citizen ___ (b) Landed immigrant ___ (c) Visa student ___

Document ID number: _____ (passport #, PR#)

Student visa's expiry date: ____/____/____ (International Students only)
(YY) (MM) (DD)

Notes

- Tuition fees are payable before course starts.
- Registration fee: \$500.00 (Non-refundable)
- All classes offered subject to sufficient enrollment.
- **EAL Program:** An 80 % tuition refund to student withdrawing 5 working days before the first class. After the program start the tuition will be non-refundable.

I declare that the information I have given in this application is truthful, complete and correct.

DATE: ____/____/____
(YY) (MM) (DD)

Student or Guardian's SIGNATURE: _____
If under 18, guardian's signature is required.

For Office use only:

ID # : _____

Payment By: _____

Confirmation No: _____