

# Application Form

## • Student Information

Last Name\*:

\*As it appears on passport

First Name\*:

\*As it appears on passport

Date of Birth:

YYYY / MM / DD

Gender:

Male  Female  X

Home Address:

City/Province:

Postal Code:

Country:

First Language:

Email:

Telephone:

Skype ID:

Status:  Domestic  International

## • Location

Vancouver  Toronto

## • Program

### School of Business

### Start Dates

- Sales & Marketing Diploma  
52 weeks
- Sales & Marketing Diploma with Co-op  
92 weeks
- Business Administration Diploma  
52 weeks
- Business Administration Diploma with Co-op  
92 weeks



- Apr. 1, 2019
- Jun. 17, 2019
- Sep. 9, 2019
- Nov. 18, 2019
- Jan. 6, 2020

### School of Customer Service

### Start Dates

- Communication & Service Essentials  
Diploma with Co-op 60 weeks
- Service Essentials for Business Diploma  
with Co-op 40 weeks
- Service Excellence for Business Certificate  
26 weeks
- Service Excellence for Business Diploma  
with Co-op 48 weeks



- Feb. 11, 2019
- Mar. 25, 2019
- May 13, 2019
- Jun. 24, 2019
- Aug. 12, 2019
- Sep. 23, 2019
- Nov. 4, 2019
- Jan. 6, 2020



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## • Agent Information (if applicable)

Agency:

Contact Person:

Agent Email:

## • Additional Services

Will you require accommodation?

- Yes
- No
- Will decide later

Would you like to buy medical insurance with ILAC IC?\*

\*It is mandatory for you as an ILAC IC student to have insurance during your stay in Canada. You may purchase with a private provider or ILAC IC.

- Yes  No  Will decide later

Accommodation type

Length of Stay

Homestay

weeks

Residence (on request)

Arrival Date:

YYYY / MM / DD

Airport Pick-up:

- Yes  No

Do you have medical issues we should be aware of?

- Yes  No

If yes, please explain:

Do you have any allergies?

- Yes  No

if yes, please explain:

Do you have food restrictions?

- Yes  No

If yes, please explain:

Do you smoke?

- Yes  No

• Do you plan to continue your studies at a public University or College in Canada after finishing your program with ILAC International College?

- Yes  No  Will decide later

•  I have read and understand all of ILAC International College policies & procedures including the Tuition Refund Policy and the Dispute Resolution Policy. I hereby certify that the above information is true and complete. I understand that any false or incomplete information submitted in support of my registration may invalidate my registration.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
YYYY MM DD