



English School of Canada

Designated Learning Institution Number

DLI # O19350421222

## 2015 Registration Form

Type: New Student / Extending Student

Student Number: 678343

Agency: N/A

### Student Information

First Name : Cheng

Gender : female

Address : 9 Zola gate

Telephone : 6479925579

Emergency Contact & Telephone : 123123123

Birth Date : Oct 03, 2015

Fax :

Last Name : Sun

Age : 22

Email : stiron88@gmail.com

Home Country or Canada : Canada

Citizenship : chinese

Country: Canada

### Program Registration

#### For Direct Entr (UCTP or Focus Program):

Offical TOEFL score : 103

Offical IELTS score : 6

English Level : N/A

#### English for Health Care

Level	@level@
StartDate	Oct 12, 2015
Number of Weeks	4 weeks

Total Number Of Weeks Registered: 50 weeks

I confirm that I have read and I accpet the Conditions of Enrolment as well as the refund policies of the English School of Canada as stated in the registration package.

Student Name: \_\_\_\_\_

Date \_\_\_\_\_