

2015 Registration Form

Designated Learning Institution Number

DLI# 019350421222

Type: New Student / Extending Student Student Number: 678343

Agency: N/A

Student Information

First Name: Steven Last Name: Chow

Gender: female Birth Date: Sep 02, 1977 Age: 40 Citizenship: Korean

Address: 90 Finch Ave E. Country: Canada

Telephone: 4165161944 Fax: Email: feng_jing@gmail.com

Emergency Contact & Telephone: 4165161944 Home Country or Canada: Canada

Accommodation Information

Accommodation Type Homestay / Residence (May - Aug. only)

Homestay options

N/A Start Date: null Finishing Date: null

Number of weeks: No

Accommodation Datesr

Departure from Toronto

Departure date from Toronto: null

Airport Pick-up Requested No Airport Pick-up Requested No

Date: Sep 27, 2015

Airport Pick-up Requested No

Date: Sep 27, 2015

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Time: 6:42 PM Airline&Flight: N/A Time: 6:42 PM Airline&Flight: N/A

Please answer the following questions to assist us in finding an appropriate host family for you.

1. Do you smoke? No Do you have any special diet or food preferences? No

2. Can you live in a home with smokers? No If yes, please Describe:

3. Can you live with pets?

No

Do you have any allergies or medical concerns?

No

4. Can you live with small children?

If yes, please Describe:

5. What are your hobbies?

Arrival in Toronto

Profession (What is your occupation?)

N/A

Additional Comments: N/A

Private Bathroom (Subject to availability)

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