

CANADIAN TECHNOLOGY COLLEGE INC.,
CANADIAN TECHNOLOGY COLLEGE
1881 Steeles Avenue West, Unit # 204A
Toronto, Ontario M3H 5Y4 Canada

REGISTRATION FORM

This Registration Form is subject to the *Private Career Colleges Act, 2005* and the regulations made under the Act.

The undersigned person hereby enrolls as a student of Canadian Technology College as of _____ [insert date] for the following:

Name of Student Mr. Miss
 Mrs. Ms. _____

Name of Program _____

Commencing on _____ Expected Completion Date _____

Credential to be Awarded Upon Successful Completion of the Program _____

Date of Birth _____ Passport Number _____

Mailing Address _____

City _____ Province _____ Postal Code _____

Phone _____ Alternative Phone _____

Permanent Address _____

City _____ Province _____ Postal Code _____

Country _____

Phone _____ Email Address _____

International Student Yes No

Location of Practicum _____ Toronto _____

How did you find about us

Friend/Relative Search engine (google, bing, etc...) Government of Ontario/Canada website

Facebook Twitter LinkedIn

Other Please, specify: _____

Admission Requirements

Have an Ontario Secondary School Diploma or equivalent;

(Signature of Student)

Date _____