

P.O. Box 200, Station Q Toronto, ON M4T 2T1 FAX: 416.484.2754

Course Request Form

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To use this form, you:

- must live in Ontario
- must be 18 years of age or over
- cannot be currently registered in a secondary school

IMPORTANT: Applicants 18 – 20 years of age must submit:

➤ A Date of Leaving Letter from their last school

> An official original Ontario Student Transcript

Have you ever en	rolled in an ILC course?	Yes If yes, No	what was your	student nur	mber?	Ontario Educatio	on Number (if assigned	1)
Please indicate your status*:	Canadian citizen other, specify:		nded immigrant/permanent resident diplo * Applicants should be pre- proof of status.				matic visa Preferred language Englis for communication or French	
Date of birth	month day	Female Male	Your legal fi	rst name(s)				
Your legal last nan	ne	•	Was this your last Yes If no, we name at birth?			, what was your last name at birth?		
What is your full n	ailing address?					Apartment/unit	number	
City		Province Onta				Postal code		
Your email address Choosing a C	-	ode	()	r mobile	elepnone numbe	r, area code, and exter	ision
IMPORTANT: If you I have enclosed: □ a Date of Leav □ my most recent	u are aged 18 – 20, you ing Letter from my last h t official original Ontario de these documents, you	nigh school Student Transcript	se see	What course would you like to take? Course code:				
What is the last gr you completed?	at is the last grade What year did you last How many sec			Do you ha high scho Yes				
us why you are enrolling in this course: To get a better job in another field I'm just taking it for interest To qualify for a promotion at work To enter a post-secondary program To apply for an apprenticeship			To earn my diploma To get a better job in another field I'm just taking it for interest To qualify for a promotion at work To enter a post-secondary program To apply for an apprenticeship			If you plan to get your Ontario Secondary School Diploma, who do you want to issue your diplomate the Independent Learning Centre your last secondary school		
To be eligible to er Is French the fi Has one of you Have you rece	inrol in Courses To rol in courses intended rst language learned an ir parents received his o ved, or are you receivin brother or sister who re	aught in French for French-language d still understood by or her primary school g, instruction in Fren	students, you r one of your par education in Fr ch in a French-	must answer rents? ench in Can language sc	r yes to at ada? :hool or ur	nit in Canada?	• /	

Method of Paymer	nt					
The non-refundable adn Do not enclose cash, ll If your cheque cannot le	LC will not be	respor	sible if the money is	lost.	d an additional \$35.00.	
Fee to be paid by V	ISA Ma	sterCar	rd cheque	money order	cash (only in person during office hours	order payable to I volitario. Post-dated
Card number (print clearly)					Expiry date:	cheques will not be accepted.
Name of cardholder:				_ Signature of o	cardholder: X	
Collection of Pers	onal Infor	matio	n and Consent	to Access ar	nd/or Release	
Education Act, the Ontario be used to establish and I Request Form and payme This information may also I will allow the ILC to exch	D Educational maintain an IL ent, evaluating D be used for s nange educati	Comm C Stud g the ed statistic ional inf	unications Authority A lent Record for the piducational requirement al purposes.	Act, and their res urposes of provio nts of my second with other educat	pective regulations. I un ding educational services dary school diploma, and ional institutions.	rmation on this form pursuant to the derstand that the information collected will so to me, including processing this Course I supervising my correspondence courses. parent/guardian, grandparent, sibling, or
child). Please indicate you	ur choice belo	W.		-		
 a) I give the ILC permis YES NO 	sion to releas	se my e	ducational information	on to my immedia	ate family (spouse, parer	nt/guardian, grandparent, sibling, or child):
		erson to	receive your educati	ional information	on your behalf. This ma	y be a friend, teacher, counsellor, etc.
b) I give the ILC permis		se my e	ducational information	on to another per	son:	
• •	•		tional information to : n information to anyo			(name)
X						
Signature of student					Date	Э
IMPORTANT: PLEASE	E RESPONE	тот о	HE FOLLOWING	QUESTIONS (OR YOUR APPLICAT	ION WILL BE RETURNED.
How did you learn about I	LC and its co	urses?	☐ internet ☐ advertisement	☐ admission☐ counselld	ns officer or (employment or guidar	social service/community worker friend or family member l'm a former ILC student
Do you have access to a	computer?	Yes	No			
Do you have an internet of	connection?	Yes	No			
If yes, would you use the	Internet to ac	cess ou	ır free online study a	ids for your cours	se? Yes	No
Your Signature for	Application	on				
To the best of my know my course(s), I agree to						en I have completed or withdrawn from ded on loan by the ILC.
NOTE: Students under 1	8 years of age	e enroll	ing under Special Cir	cumstances mus	st have a parent or guard	dian sign where indicated by an X.
X						
Signature of student					Dat	e
What to Do With Y	our Comp	leted	Course Reques	t		
Enclose any required doo	cumentation a	ınd sub	mit it with this form to	the ILC.		
MAIL: Independent Learning Ce P.O. Box 200, Station Q Toronto, ON M4T 2T1	entre		(: .484.2754 lly if you are paying b	y credit card)	Toronto, ON 8:30 a.m.–5:00 (Please note th	reet, Ground Floor p.m., Monday–Friday lat your course request cannot be processed Your course materials will be mailed to you.)

Please ensure that you complete *all* sections of this form and sign where indicated with an X. Remember to include your course fee. Incomplete forms cannot be processed and will be returned.