



To use this form, the student

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

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

IMPORTANT: Use this form to request English as a Second Language (ESL) courses only. The student MUST have a Volunteer Tutor to enrol in these courses. If no Volunteer Tutor has signed this form, the application will be returned. This form is to be completed by the Volunteer Tutor.

PLEASE PRINT CLEARLY IN INK

Has the student taken a course with the ILC before? yes <input type="checkbox"/> If yes , what was the student number? no <input type="checkbox"/>	Student's Ontario Education Number (OEN) (if assigned)
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Please indicate the student's status:

<input type="checkbox"/> Canadian citizen	<input type="checkbox"/> landed immigrant/permanent resident
<input type="checkbox"/> diplomatic visa	<input type="checkbox"/> refugee or refugee claimant
<input type="checkbox"/> other, please specify _____	

Female <input type="checkbox"/> Male <input type="checkbox"/>	Student's legal first name(s)	Student's legal last name
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Was this the student's last name at birth? no <input type="checkbox"/> If no , what was the student's last name at birth? yes <input type="checkbox"/>	If not born in Canada, in what year did the student arrive?
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When was the student born?	year month day	In which language should we communicate with the student?	English <input type="checkbox"/> or French <input type="checkbox"/>	Language first spoken by student
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Student's full mailing address	Apartment/unit number
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City	Province Ontario	Postal code
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Student's home telephone number and area code ()	Student's business telephone number, area code, and extension ()
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Student's **email address**

ILC tries to accommodate students with special needs. Refer to the *Course Guide* for instructions.

Choosing a Course

What course does the student wish to take?

English as a Second Language (ESL)

Credit course	Non-credit courses
<input type="checkbox"/> ESLAO-A	<input type="checkbox"/> ESL3N-E
<input type="checkbox"/> ESLBO-A	<input type="checkbox"/> ESL4N-E

Volunteer Tutor Information

Your first name(s)		Your last name	
Your full mailing address (The student's course materials will be sent to you.)			Apartment/unit number
City	Province	Postal code	
Your home telephone number and area code ()		Your business telephone number, area code, and extension ()	
Your email address			

Volunteer Tutor Agreement

I will spend time with the student on a regular basis. I will ensure that the course work is completed and sent to ILC and that all material provided on loan is returned to the ILC when the student has finished the course. I will refer the student to the *Course Guide* or the *How to Get Started* pamphlet, if and when necessary.

X

Volunteer tutor's signature (We cannot process the course request without a signature here.) _____ Date _____

Collection of Personal Information and Consent to Access and/or Release

In signing below, I understand that TVOntario/Independent Learning Centre (ILC) collects the personal information on this form pursuant to the Education Act, the Ontario Educational Communications Authority Act, and their respective regulations. I understand that the information collected will be used to establish and maintain an ILC Student Record for the purposes of providing educational services to me, including processing this Enrolment Form and payment, evaluating the educational requirements of my secondary school diploma, and supervising my correspondence courses. This information may also be used for statistical purposes.

I will allow ILC to exchange educational information about me with my volunteer tutor and other educational institutions.

You may choose to allow the ILC to release your educational information to your immediate family (spouse, parent/guardian, grandparent, sibling, or child). Please indicate your choice below.

a) I give the ILC permission to release my educational information to my immediate family (spouse, parent/guardian, grandparent, sibling, or child): YES NO

You may also select another trusted person to receive your educational information on your behalf. This may be a friend, teacher, counsellor, etc. Please indicate your choice below.

b) I give the ILC permission to release my educational information to another person:
 YES, you may also release my educational information to : _____ (name)
 NO, you may not release my education information to anyone else.

X

Signature of adult student _____ Date _____

Method of Payment

The non-refundable administration fee for each course is \$40.00.

- Do not enclose cash. ILC will not be responsible if the money is lost.
- If your cheque cannot be processed due to insufficient funds, you will be charged an additional \$35.00.

Fees to be paid by Visa MasterCard cheque money order cash

(only in person during office hours)

Important: Make your cheque or money order payable to **TVOntario**. Postdated cheques will not be accepted.

Card number (print clearly)

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Expiry date

Name of cardholder

Signature of cardholder

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X

What to do With Your Completed Course Request

Enclose any required documentation and submit it with this form to the ILC.

MAIL:
Independent Learning Centre
P.O. Box 200, Station Q
Toronto, ON M4T 2T1

FAX:
416.484.2754
(only if you are paying by credit card)

IN PERSON:
2180 Yonge Street, Ground Floor,
Toronto, ON
8:30 a.m.–5:00 p.m., Monday–Friday
(Please note: Your request cannot be processed while you wait. Your course materials will be mailed to you.)

This form MUST be signed by the volunteer tutor AND by the student.