CONESTOGA
Connect Life and Learning

Conestoga College Institute of
Technology and Advanced Learning
Admissions Office
299 Doon Valley Dr.
Kitchener, Ontario N2G 4M4
Tel. 519-748-5220 Fax 519-895-1097

Use this form to apply for:

Continuing Education and Corporate Training Programs
Do not use this form to register for individual courses

Program Transfer with Advanced Standing
Currently enrolled in a Conestoga College Program and wish to transfer to a semester beyond semester one of another program (includes co-op)

Readmission with Advanced Standing
Formerly enrolled in a Conestoga College Program and wish to be admitted to a program beyond semester one

Processing Fee

A $25 fee is charged for processing this information and is valid for one academic year. Form to be submitted to the Registrar's Office. This item is not taxable.

Freedom of Information The personal information collected on this form is used for, administrative purposes of the Registrar's Office under the authority of the Ontario Colleges of Applied Arts and Technology Act, R.S.O. 2002, and regulations thereunder. Personal information will be protected in accordance with the Freedom of Information and Protection of Privacy Act (FIPPA).

Office Use Only
Date _____
Charge _____
Receipt No. _____
Clerk Initial _____

Program Application Form

Note: If you need help to complete this form, please call the Information Centre at 519-748-5220, ext. 3656.

Section A - Personal Information

Student No. _____

❒ Mr ❒ Mrs ❒ Ms

Last Name | First Name | Second Name

Previous Last Name | Date of Birth (Y/M/D)

Apt. No. | Street Address | City

Province or Country | Postal Code | Tel. No. | Work/Cell Tel. No.

E-mail | Fax No.

Have you attended a program or course at Conestoga? ❒ Yes ❒ No ❒ Full-time ❒ Part-time

Program Attended _____ Years Attended _____

Section B - Status in Canada

Attach documentation of Status in Canada if not a Canadian Citizen

❒ Canadian Citizen ❒ Permanent Resident (attach documentation) ❒ Student Visa (attach documentation)
OR Country of Citizenship _____

Section C - Program Application Information

❒ I have attached proof of the Admission Requirements for the program(s) listed below.
(Admission requirements are listed in College Publications, or call the Information Centre 519-748-5220, ext. 3656)

1. Program Name _____ Program Number _____
   Semester or Level _____ Campus _____ Start Date* _____
   Full-time ❒ Part-time ❒ Co-op ❒ Non Co-op ❒
2. Program Name _____ Program Number _____
   Semester or Level _____ Campus _____ Start Date* _____
   Full-time ❒ Part-time ❒ Co-op ❒ Non Co-op ❒
3. Program Name _____ Program Number _____
   Semester or Level _____ Campus _____ Start Date* _____
   Full-time ❒ Part-time ❒ Co-op ❒ Non Co-op ❒

* If the requested start date is not available, applicant may be considered for the next available start date.

Section D - Method of Payment (this is not a taxable item)

Processing fee of $25 is required. Without payment, this application cannot be processed.

❒ Cash (in person only) ❒ Debit Card (in person only)

❒ Cheque or ❒ Money Order (payable to Conestoga College, we do not accept post-dated cheques)

❒ VISA ❒ MasterCard ❒ American Express

Credit Card Information

Credit Card Expiry Date Month ____ Year ____

Credit Card Number | | | |

Cardholder's Name First Name | Surname

Cardholder's Signature _____

I certify that the above information is true and complete. I understand that any false or incomplete information submitted in support of my application may invalidate my application. I have read the freedom of information and protection of individuals privacy statement.

Signature of Applicant _____ **Date** _____