

A Student Information

Last Name: As it appears on your passport. E-mail:

First Name: As it appears on your passport. Country: City:

Gender: M F X: Address:

Chosen Name: Only if X was chosen above. Province: Postal Code:

Date of Birth: YYYY MM DD Emergency Contact Name:

Nationality: Emergency Contact Phone:

Primary Language: WhatsApp Phone:

Passport #: Are you currently in Canada? Yes No

Are you planning on attending a university or college in Canada? Yes No

What is your main goal in taking the Boot Camp? PGWP PR Application Citizenship Application

Please take our online English test: [LINK](#) or visit [www.ilac.com/online-test/](http://www.ilac.com/online-test/)

B CELPIP

<b>CELPIP Boot Camp</b>	<b>Full CELPIP Boot Camp (4 weeks)</b> <b>Listening &amp; Speaking (2 weeks)</b> <b>Reading &amp; Writing (2 weeks)</b>	<b>EST Time Slot (Eastern)</b> <b>PST Time Slot (Pacific)</b>	<b>Start Date:</b> (every 2 weeks)
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C IELTS

<b>IELTS Boot Camp</b>	<b>Full IELTS Boot Camp (4 weeks)</b> <b>Listening &amp; Speaking (2 weeks)</b> <b>Reading &amp; Writing (2 weeks)</b>	<b>EST Time Slot (Eastern)</b> <b>PST Time Slot (Pacific)</b>	<b>Start Date:</b> (every 2 weeks)
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D Agent

Have you been in contact with an agent? Yes No

Agency: City: Country:

Contact Agent: Agent Email:

I, hereby certify that the above information is true and complete. I understand that any false or incomplete information submitted in support of my registration may invalidate my registration. I have read and understand all of ILAC policies & procedures including the [Tuition Refund Policy](#).

I, understand I am responsible to bring my own device to class to facilitate learning where necessary.