

(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/

(B) CELPIP

**CELPIP
Boot
Camp**

Full CELPIP Boot Camp (4 weeks)

Partial CELPIP Boot Camp (2 weeks)
See start dates for skills offered.

EST Time Slot (Eastern)

PST Time Slot (Pacific)

Start Date:
(every 2 weeks)

(C) 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.