St. Lawrence College
Dream it. Then live it.

Registration – Part-Time Studies

Brockville
Phone: 613-345-0660, press 2, 1-866-276-6601
Fax: 613-345-0124

Cornwall
Phone: 613-933-6080, press 2, 1-866-276-6601
Fax: 613-937-1524

Kingston
Phone: 613-544-5400, press 2, 1-866-276-6601
Fax: 613-545-3923

Today's Date: _____

Student #: _____

Date of Birth (required) _____
mm dd yy

Name: (please print) _____
(Mr./Mrs./Ms./Miss) Surname Given Name Middle Initial

Home Address: (please print)

Street _____

City _____ Postal Code _____

Home Tel. _____ Business Tel. _____

Email _____

If your information has changed since you last took a course, please fill out the following information where applicable.

Previous Name _____

Previous Address _____

_____

To formalize compliance with the Freedom of Information and Protection of Personal Privacy Act. St. Lawrence College requires that you read the following statement.

The information gathered through this document is collected under the legal authorization of the Colleges and Universities act, R.s.o. 1908 Chapter 272 S,5;R.R.O. 1980 Regulation 640. The information is used for the educational, administrative and statistical purposes of the College and/or ministries and agencies of the Government of Ontario and the Government of Canada.

FIRST COURSE

_____
Course Code

_____
Course Title

_____
Start Date

SECOND COURSE

_____
Course Code

_____
Course Title

_____
Start Date

THIRD COURSE

_____
Course Code

_____
Course Title

_____
Start Date

Are you working toward a Diploma or Certificate?
If yes, name of program:

_____

_____

❑ Cheque/Money order enclosed
Must be payable to St. Lawrence College. Post-dated cheques not accepted.

❑ **Visa** ❑ **Mastercard** ❑ **Amex**

Card Number ☐☐☐☐-☐☐☐☐-☐☐☐☐-☐☐☐☐ Expiry _____

❑ Sponsored (If sponsored by an employer or agency, a letter of authorization on company letterhead, or purchase order must accompany registration form.)

PAYMENT

Fee (first course) $_____

Fee (second course) $_____

Fee (third course) $_____

_____

Total payment enclosed **$**_____