

Toronto School of Management

300-22 College Street, Toronto, ON, M5G 1K2, Canada

APPLICATION FORM

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This Application is subject to the Private Career Colleges Act, 2005 and the regulations made under the Act. The undersigned person hereby enrols as a student of Toronto School of Management as of [for the following:

STUDENT DETAILS		PLEASE CHOSE YOUR PROGRAM:
Title: ☐ Mr ☐ Mrs ☐ Miss		☐ Preparatory Course for ACCA Examination
First Name:		* Please check for advance standing granted papers:
Middle Name:		□AB □MA □FA □LW □PM □TX
Last Name:		□FR □AA □FM □SBL □SBR □APM □AAA
Date of Birth:		☐ Diploma Programs (Enter program name below)
Mailing Address:		
Postal Code: Country:		Are you also applying for a pathway program? ☐ YES (Please specify below) ☐ NO
Country of Application Submission:		
Mobile Number:		
E-mail Address:		 Preparatory Course for ACCA Examination: N/A Diploma Programs: Issued upon successfully complete & pass all modules.
Referral Information if applicable (agent):		
		EDUCATIONAL BACKGROUND
Passport Number:		School Name: (University/College/Vocational/High School)
PROGRAM INFORMATION		Qualification Earned:
Start Date:		
Completion Date:		
Will you apply for Scholarship or Bursary? Yes	□ No	
Will you apply for payment plan? ☐ Yes	□ No	
Are you an International Student?	□ No	