

SECTION A STUDENT INFORMATION

STUDENT SURNAME		LEGAL FIRST NAME		MIDDLE NAME(S)	
DATE OF BIRTH (DD-MMM-YYYY)	GENDER Male <input type="checkbox"/> Female <input type="checkbox"/>	MAILING ADDRESS			
CITY/TOWN	PROVINCE	POSTAL CODE	HOME PHONE	ALTERNATE PHONE	
EMAIL ADDRESS			PREVIOUS NAME (IF ANY)		
Have you been enrolled with ISO before?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, what year were you enrolled? _____	
REASON FOR ENROLLMENT (PLEASE CHECK ONE)					
<input type="checkbox"/> Not Offered in School		<input type="checkbox"/> Timetable Conflict			
<input type="checkbox"/> Post-secondary Requirement		<input type="checkbox"/> Unknown			
Will you be graduating this school year?		<input type="checkbox"/> January	<input type="checkbox"/> June		

- Permission for student to take course(s) and write exams over the summer.
- Permission for student to email assignments.

SECTION B SCHOOL INFORMATION

PRESENT SCHOOL	SCHOOL ADDRESS	SCHOOL CODE	
AUTHORIZED BY (SIGNATURE)	TITLE	STUDENT MET #	
FACILITATOR NAME	FACILITATOR EMAIL	PHONE	PHONE EXT

SECTION C STUDENT AND PARENT/GUARDIAN

Students over 18 years of age are to complete this portion in accordance with the Freedom of Information and Protection of Privacy Act.

I consent to the school principal or facilitator communicating with the ISO staff.

I consent to my parent/guardian communicating with the ISO staff.

I hereby certify that all statements made above are correct and complete, and that any misrepresentation of this data may result in the withdrawal of my registration status.

Student Signature _____ Date _____

Parent/Guardian Name (Please Print) _____

Parent/Guardian Signature (If student is under 18 years of age) _____ Date _____

SECTION D COURSE(S) > STUDENTS ARE LIMITED TO 2 ACTIVE REGISTRATIONS AT ONE TIME ½ CREDIT \$115 ~ 1 CREDIT \$135

COURSE NAME (Students have 12 months from date of registration to complete a course)	SUBJECT CODE	FEES
<ul style="list-style-type: none"> • Make Cheques/Money Orders payable to the Minister of Finance. Do not send cash in the mail. • Refunds must be applied for during the first 30 days of the student's registration. • A \$30 administration fee deducted if course returned unopened. A \$50 administration fee is deducted from refund if course returned opened and unmarked. • Costs for returning courses are at the purchaser's expense, ISO is not responsible for lost or damaged goods. • Refer to the 2011 - 2012 Course Guide for ISO or www.edu.gov.mb.ca/k12/dl for the complete Refund/Return Policy. 		<p>Total Course Fee</p> <p>Please do not add GST or PST Enter this Total Course Fee amount on reverse of form.</p>

Admission/Registration Form

SECTION E MISCELLANEOUS FEES (GST APPLICABLE) ➤ FOR CURRENT STUDENT ONLY

ITEM NAME	FEE
<input type="checkbox"/> Course Transfer	25.00
<input type="checkbox"/> Exam Rescheduling or Exam Rewrite (circle one)	50.00
<input type="checkbox"/> Replacement Material	50.00
<input type="checkbox"/> Reregistration (6 months)	60.00

Note! • Textbook titles followed by MTBB must be ordered from the Manitoba Text Book Bureau (866-771-6822).

SUBTOTAL	
5% GST	

Amount Owning
Total Section E

SECTION F SUPPLIES (AUDIOS, VIDEOS, SLIDES, VIEWERS) (GST AND PST APPLICABLE) ➤ SOME COURSES MAY REQUIRE SUPPLIES

CODE	FEE	CODE	FEE	CODE	FEE

Note! • Supplies are Non-Refundable.

SUBTOTAL	
5% GST	
7% PST	

Total Section F

SECTION G CREDIT CARD

VISA MASTERCARD

Card # _____ Expiry Date _____

Cardholder Name (please print) _____

Signature _____ Phone # _____

SECTION H FOR OFFICE USE ONLY (Do not write in this box)

Date Received _____	CC Authorization # _____
Remittance Amount _____ Refund Amount _____	Purchase Order # _____
Balance Owning _____	Invoice/Refund # _____

School Divisions/Organizations: Please enclose a Purchase Order with the application(s) if you are requesting invoicing.

PO/Refund Information _____

Total Section D

Grand Total