



STAR COLLEGE

139 College Drive NW
Brooks, AB, T4G 3B5
Phone: (587) 951-4520
reception@starcollege.ca
admin@starcollege.ca

Student Registration Form

Applicants **must** include their TOEFL score report and all transcripts (in English) with the application form for admission to diploma programs.

Personal Details

Title	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>
Family Name				
First Name				
Second Name				
Date of Birth	Day	Month	Year	Sex Female <input type="checkbox"/> Male <input type="checkbox"/>
Address	House or Apt #			
	Street			
	City		Province/State	
	Postal Code		Country	
Home Telephone	Area Code	Number		
First Language				
E-mail				
Driver's License	Expiry Date			

Education

Name of Secondary School	Location		
Level/Certificates Completed	Years Attended: From _____ to _____		
Name of College/University/ Training Centres Attended			
Level/Certificates Completed			
Areas of Study/Major			
English Testing	TOEFL	Paper Score	Computer Score
	IELTS		