



FIRST NAME _____ LAST NAME _____

DATE OF BIRTH _____ SOCIAL INSURANCE NUMBER (optional) _____

MAILING ADDRESS – APT # _____ STREET _____ CITY _____

PROVINCE/STATE _____ POSTAL/ZIP CODE _____ COUNTRY _____

TELEPHONE _____ FAX _____ MOBILE _____

EMAIL _____

OCCUPATION _____ EMPLOYER _____

Please list three contacts in the event of an emergency:

NAME _____ TELEPHONE _____ ADDRESS _____

NAME _____ TELEPHONE _____ ADDRESS _____

NAME _____ TELEPHONE _____ ADDRESS _____

Please select one of the following:

- I am applying as a:
- Canadian citizen
 - Canadian Permanent Resident
 - International student

Is English your primary language? Or have you taken a minimum 2 years full time study in English?

- Yes
- No

If no, TOEFL or IELTS scores must be forwarded to the school or an internal English proficiency test will be administered.

PROGRAM INTEREST

Must be high school graduate or 19 years of age or older at the start of the student's program of study.

I would like to apply for the following program (please check your choice):

- Esthetics Day Program Starting On _____
- Other: please specify Starting On _____

FINANCIAL RESPONSIBILITY

Have you ever had any types of loans? (school, personal)

- Yes
- No

If yes, please specify _____

Have you ever defaulted on a loan?

- Yes
- No

If yes, please specify the type of loan default _____

Canadian citizens or Canadian Permanent Residents who have completed grade 12 or are at least 19 years of age are eligible for government financial assistance.

Please check the appropriate box below:

- I am paying for the course through my own finances
- I would like to apply for a BC/Canada Student Loan
- I am obtaining a loan through other means, please specify _____
- Other _____

EDUCATIONAL INFORMATION

Did you graduate from high school?

- Yes No

If yes, please tell us where: _____

Did you attend a Post Secondary Institution?

- Yes No

If yes, please tell us where: _____

Transcripts:

- My high school or college transcripts are enclosed
- My transcripts will be forwarded by _____

What level of education?

(please specify area of study and name of institution)

- High School
- Diploma, please specify _____
- Undergraduate Degree, please specify _____
- Graduate Degree, please specify _____
- Other, please specify _____

Do you have any education or experience that may relate to the study of Esthetics?

- Yes No

If yes, please specify _____

Have you studied anatomy or physiology?

- Yes No

If yes, how advanced were your studies?

HEALTH

Do you have any health issues/problems that the school should be aware of?

- Yes No

If yes, please specify _____

Are you taking any medications that the school should be aware of?

- Yes No

If yes, please specify _____

Do you have normal hand/eye coordination?

- Yes No

Do you have any allergies or skin sensitivities that would prevent you from receiving Esthetic treatments (ie. psoriasis, excema)?

- Yes No

If yes, please specify _____

GENERAL INTEREST

Have you applied make-up or skin care to others?

- Yes No

Have you ever experienced a spa treatment (ie. facial, manicure, massage)?

- Yes No

Are you comfortable receiving Esthetics services from others?

- Yes No

How did you decide that you wanted to be an Esthetician?

What area of Esthetics appeals to you the most?

- Promotion of health
- Involvement with the medical field
- Nurturing/caring dynamics
- Business development potential
- Other, please specify _____

How did you hear about Blanche Macdonald Centre?

- Reputation
- Advertising, please specify _____
- Internet
- Magazines/Newspapers, please specify _____
- Referral, please specify _____
- Other, please specify _____

Why did you choose Blanche Macdonald?

This application has been completed by:

Name of Applicant (please print) Signature of Student

Name of parent or guardian (please print) Signature of parent or guardian
if applicant is under 19 if applicant is under 19

Date

Upon receipt of completed application and acceptance into the college, students must provide the appropriate enrollment fee. An official enrollment agreement will be issued and your name added to the list for the program/course of your choice.

Note: Course offerings, schedules, tuition fees, facilities and faculty are subject to change without notice. We also reserve the right to cancel or postpone classes due to inadequate enrollment.