

STUDENT APPLICATION FORM

FOR OFFICE USE ONLY CREDENTIAL: DIPLOMA DATE RECEIVED:

Admission Requirements

- Have an Ontario Secondary School Diploma or equivalent; or Be at least 18 years of age and pass a Qualifying Test
- Step 1 Personal Information

Step 11 ersonar information				
Date of Birth: (DD-MM-YYYY)	Canadian Citizen, Refugee Status YES NO	Permanent Resident, or		
Last Name:	First Name:		Middle Name:	
Previous Name: (While at RSHB, if different from above)	Have you attended RSHB in the past? (Please check 1 box) NO YES		Phone Number:	
Email Address:	_ 120		Alternate Phone Number:	
Current Home Address: City (Include Unit#, Street # & Name)		City:	Province:	Postal Code:
Step 2 Program Information Program Name: Expected Start Date: (DD-MM-YY)				art Date:
Step 3 Student/Parent/Guardian Signature				
Signature:			Date:	
By signing this form, I confirm that the information herein is true and complete, and I authorize payment to Royal School of Hairdressing & Barbering using the following payment information. I understand a \$100 non-refundable application fee is required upon submission.				
Step 4 Payment Information (NO PER information below is required for application spayment to info@royalschool.ca)				
VISA MASTERCARD AMEX CERTIFIED CHEQUE EFT (Electronic Funds Transfer)				
Cardholder Name: Cardholder Signat			-	-
Credit Card Number: (Please Print Clearly)		Expiry Date: (MM/YY)		3 digit number on back of VISA or Card or 4 digit numeric code on AMEX