

2011 COURSE SCHEDULE

Effective April 21, 2010

ACADEMIC ENGLISH

12 weeks 1:00 pm-5:00 pm*
 Tuition Fee \$ 4,940.00
 Health Insurance and Health Services Fee \$ 145.20
Total \$ 5,085.20

- 2011 0150-041 Jan 10 – Apr 1
 0150-042 Apr 4 – Jun 24
 0150-043 Jul 4 – Sep 23
 0150-044 Sep 26 – Dec 16

ACADEMIC SKILLS FOR UNIVERSITY AND COLLEGE SUCCESS

12 weeks 9:00 am-1:00 pm*
 Tuition Fee \$ 3,675.00
 Health Insurance and Health Services Fee \$ 145.20
Total \$ 3,820.20

- 2011 2491-001 Jan 10 – Apr 1
 2491-002 Apr 4 – Jun 24
 2491-003 Jul 4 – Sep 23
 2491-004 Sep 26 – Dec 16

BUSINESS ENGLISH

12 weeks 9:00 am – 1:00 pm*
 Tuition Fee \$ 3,675.00
 Health Insurance and Health Services Fee \$ 145.20
Total \$ 3,820.20

- 2011 2170-010 Jan 10 – Apr 1
 2170-011 Apr 4 – Jun 24
 2170-012 Jul 4 – Sep 23
 2170-013 Sep 26 – Dec 16

Tuition and health fees must be paid in full at time of registration. Bursaries, scholarships and other forms of financial aid are not available. All University of Toronto ELP students (international students, immigrants and Canadian citizens) are required to pay the same tuition.

You may enroll in more than one course/section with this form.

* ELP reserves the right to adjust the timing of all courses.

COMPREHENSIVE ENGLISH

6 weeks 9:00 am – 1:00 pm*
 Tuition Fee \$ 2,445.00
 Health Insurance and Health Services Fee \$ 72.60
Total \$ 2,517.60

- 2011 0151-078 Jan 10 – Feb 18
 0151-079 Feb 22* - Apr 1
 0151-080 Apr 4 – May 13
 0151-081 May 16 – Jun 24
 0151-082 Jul 4 – Aug 12
 0151-083 Aug 15 – Sep 23
 0151-084 Sep 26 – Nov 4
 0151-085 Nov 7 – Dec 16

* Monday, Feb 21st is a holiday

SPEAKING ENGLISH

3 weeks 9:00 am – 1:00 pm*
 Tuition Fee \$ 1,275.00
 Health Insurance and Health Services Fee \$ 36.30
Total \$ 1,311.30

- 2011 1660-033 May 16 – Jun 3
 1660-034 Jun 6 – Jun 24
 1660-035 Jul 4 – Jul 22
 1660-036 Aug 2* - Aug 19

*Monday, Aug 1st is a holiday

SPEAKING ENGLISH PLUS

7 weeks 9:00 am – 1:00 pm*
 Tuition Fee \$ 2,855.00
 Health Insurance and Health Services Fee \$ 84.70
Total \$ 2,939.70

- 2011 2131-004 Jul 4 – Aug 19

Total fee includes health insurance and health services, and course materials, workshops and several events.

For the most up-to-date course dates, tuition and health fees please check our website: <http://learn.utoronto.ca>

Payment Methods (Canadian dollars only).

We do not accept cash, personal cheques or wire transfers.

-    Official Bank Cheque/Money Order * Traveller's Cheque * (*Payable to University of Toronto)

- Saudi Arabia Cultural Bureau Scholarship sponsored Saudi Arabia Cultural Bureau Dependent sponsored

Credit Card Number _____ Expiry Date _____ Signature on Cardholder _____

Name of Cardholder on credit card – please print _____ Paid by (if other than student) _____ Signature (Payor) _____

Total Enclosed: \$ _____ Canadian Dollars _____
 Please print name (Payor) _____

Application Form

Please Print Clearly



Student's Family Name _____ Student's First Name _____ Male Female

Date of Birth (Day / Month / Year) _____ Country of Birth _____

Language _____ Country of Citizenship _____ Occupation (or "student") _____

HOME COUNTRY ADDRESS

Street Number & Street Name _____ Apartment Number _____

City _____ Province _____ Postal/Zip Code _____ Country _____

Telephone Number _____ Email Address _____

CANADIAN ADDRESS

Street Number & Street Name _____ Apartment Number _____

City _____ Province _____ Postal Code _____

Telephone Number _____ Second Email Address (if applicable) _____

ACCEPTANCE DOCUMENTS AND EMERGENCY INFORMATION

Where would you like your *Receipt and Letter of Acceptance* mailed? Home Address Canadian Address

Would you like your documents faxed to you? Yes No

If yes, please provide a fax number _____

Please allow 4-5 days for these documents to arrive in Canada. Please allow 2-3 weeks for these documents to arrive overseas.

Who can we contact in an emergency? _____ Name _____ Relationship _____

Emergency Telephone Number _____ Email Address _____

Declaration: I have read and understood the Refund and Transfer Policies and Conditions for the School of Continuing Studies' English Language Program.

Student Signature _____ Date (Day / Month / Year) _____

Payor's Signature _____ Date (Day / Month / Year) _____