

Continuing Education Centre – Oshawa Campus

850 King St. West, Unit 26, Oshawa, ON L1H 1G5 TEL: (905) 438-0570 FAX: (905) 438-0571

MICROSOFT OFFICE SPECIALIST CERTIFICATE REGISTRATION FORM

September 25, 2019 – January 8, 2020 February 24, 2020 – June 3, 2020 Monday and Wednesday Evenings 5:30 pm – 9:00 pm

Surname (Legal last name)	First Nar	ne (Legal First Name)	OEN	
(OEN would have been assigned	if you were enro	olled in any school in On	tario during the past 15 years.)	
Last School you attended:		Year		
Address:		City/Town	Post 10 de	
Street		City/ I own	Postal Code	
Date of Birth://	Phone #: _	-	Gender: Male Female (please circle one)	
Email Address:				
Citizenship Status:	Date of E	intry into Canada if not b	oorn here:	
Name of Country or Province, if k	oorn outside of (Ontario/Canada		
Enrollment is continuous –	with a winter	break between Janu	uary 8 th and Feb. 24 th , 2020	
Students pay	\$45.00 per eb	ook <u>or</u> \$100.00 per h	ard copy book	
Payments are to be made o	nline using C	ash-On-Line; Debit o	or Credit Card or cash	
Date:	Student Sig	nature:		
Total Paid:		Date:		
☐ Cash ☐ Credit	□ Debit	Received by:		