

# Windsong School of Healing Ltd. Student Application for Admission



**Windsong School of Healing Ltd.**  
 6199 Smith Road Port Alberni, B.C. V9Y 8M1  
 250-723-3307 [windsonghealing@telus.net](mailto:windsonghealing@telus.net)  
[www.windsonghealing.com](http://www.windsonghealing.com)

PCTIA Registration Number **2056**

This Institution is PCTIA Accredited:  Yes  
 No

Name, Address, and Telephone Number of Campus to be Attended  
 (If different from main location)

## STUDENT INFORMATION

Student Last Name

Student First Name and Initial

Student Previous Last Name (if applicable)

Student Previous First Name and Initial (if applicable)

Student Local Mailing Address (including country)

Postal Code

Student Permanent Mailing Address (including country) (if different from above)

Postal Code

Student Telephone Number

Alternative Telephone Number

Student Email Address

International Student:

Yes

No

Student Alternative Email Address

Date of Birth:

Y Y Y Y M M D D

Gender

Male

Female

Postal code of last permanent residence in Canada

## PROGRAM INFORMATION

Program Name (as registered with PCTIA)

Program Duration in Hours

Program Duration in Months

Program Start Date

Program End Date

Credential Issued on Graduation

Diploma

Certificate

Post-Diploma

Other (please specify) \_\_\_\_\_

Program Delivery Method

On-Site

Distance

Combined

Language of Delivery if other than English \_\_\_\_\_

**PROGRAM ADMISSION REQUIREMENTS**

**General Admission to the Program Requires:** Required Grade 12 or GED Completion; OR mature student status validation; OR Literacy test to be administered by Windsong School of Healing Ltd. for students 18 and over. Completed Student Application form. Birth certificate or valid government issued identification; Payment of Registration Fee Domestic Or International; Criminal Record Check for "working with the vulnerable sector" IF Taking Student Clinic Practicum; Medical Clearances Letter for Physical and Mental Ability identifying any Contagious Diseases or Chronic Conditions; completion of Required Written Interview with references; Valid Student Visa for Foreign Student Applications.

**All Admission Requirements must be met and filed for Acceptance into the Certified Holistic Health & Shiatsu Practitioner™ Program or Individual Credit Courses towards Designation. No Waivers Apply.**

**Admission to any program for International Student Requires:** The above Documentation accompanied by a Valid Student Visa and English Competency Certificate; Payment of Non-Refundable \$300.00 Admission Fee.

**Admission as a Mature Student to Any Program Requires:** Copy of Birth Certificate; Transcripts of GED Equivalent or Post Secondary Education showing more than 1 calendar year out of school post the age of 19, or signed letter of English Competency; Completed Admissions Form With Written Student Interview and 2 Letters of Reference; Medical Health Clearances Letter & completion of requirements for Onsite, Distance, or International students; Payment of Non-Refundable Registration Fee.

**Applicants wishing to pursue module based upgrading and continuing credits require a completed Student Application Form, payment in Full of Tuition or Module Cost, Birth certificate or valid government issued identification, and any prerequisite learning or certificate specified in the Course Calendar.**

**PROGRAM COSTS**

Program Costs in Canadian Dollars (\$CDN):	Amount
• Tuition	\$
• Registration/Application Fee	\$
• Prior Learning or Portfolio Assessment Fee (if applicable)	\$
• Textbooks	\$
• Supplies/Materials	\$
• Lab Fees	\$
• Uniforms	\$
Other (please specify) <u>Archiving Fee</u>	\$3.50
Other (please specify) _____	\$
<b>TOTAL PROGRAM COSTS</b>	<b>\$</b>

**PAYMENT PLAN**

Payment will be made by way of: Certified Cheque, Cash, Credit Card

Payment Amount(s)	Date(s) Due
Registration Fee      \$ _____	Non- Refundable      Upon Application
Tuition Fees      \$ _____	Refund Policy In Effect      _____
Books and Supplies      \$ _____	No refunds on used materials      _____
Archiving Fee      \$3.50	No Refund Available      _____
<b>Total Fees Due      \$ _____</b>	<b>Paid By      _____</b>

# Important Information

Before you begin studies at a registered institution you must sign a student enrolment contract. The institution is required to provide you with a signed copy of your enrolment contract and to maintain a copy in your student file. Under the Personal Information Protection Act, you are entitled to access your student file. Further information about storage and access to your student file is contained in the institution's Privacy Policy.

**Before you sign an enrolment contract, there is important information you need to know:**

## Required Information

The institution must provide you with written copies of its: Dispute Resolution / Grade Appeal Policy, Dismissal Policy, Admissions Policy, Privacy Policy, Attendance Policy, and Tuition Refund Policy, plus a copy of the Program Outline for the program you are taking. Ensure you have understood this information before you sign an enrolment contract.

Your enrolment contract must include the institution's tuition and fee refund policy which sets out the amount of tuition that will be retained in the event you withdraw or are dismissed from the program. The institution's tuition and fee refund policy must comply with the minimum requirements established by PCTIA's Bylaws, as set out below:

Your student enrolment contract must include a copy of the B.C. Private Career Training Institutions Agency Statement (Appendix "A") and an Authorization for Indirect Collection of Personal Information (Appendix "B".)

## ***Prohibitions:***

- **The institution is prohibited from guaranteeing a student or prospective student employment, income, or eligibility for a work permit;**
- **Program admission requirements for your program of study cannot be waived;**

DECLARATION	
By signing this form, the student acknowledge having read the information under the heading "Important Information" contained herein prior to executing this enrolment contract.	
_____ Printed Name of Student	
_____ Signature of Student	_____ Date Signed