



Office: 1.647.497.8940

Toll Free: 1.877.429.4029

Fax: 1.647.943.4989

May 31, 2018

Jaskirat Kaur H-NO-599,LIG PHASE 1,URBAN ESTATE DUGRI LUDHIANA, PUNJAB 141013 IN

Dear Jaskirat Kaur,

Congratulations and Welcome! Yorkville University and the faculty of the Bachelor of Business Administration (Project Management) program are pleased to advise that you have been accepted into the program starting July 2018.

Additional information about the registration process will be sent to you via e-mail.

Again, congratulations on being admitted into the Bachelor of Business Administration (Project Management) program. The faculty and staff look forward to working with you to achieve your career and professional goals.

Sincerely

Rick Davey, Ed.D.

President





2018/05/29

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PERSONAL INFORMATION

 Family Name Kaur 					2. 6	iiven N	lame			
					Jaskirat					
3. Date of birth (MM/DD/YYYY)					4. Student ID Number					
7/21/1000					2018040187					
						e de l'Immigration, Diversité et Inclusion (MIDI) letter				
5. Certificat d'acceptation du Quebec (CAQ) or Minister () Yes (X) No					CAQ Nun	nber	n/a	Expiry / /		
6. Student's full mailing address										
P.O. Box	Student's run maning a	Apt./Unit			Street No.			Street Name		
P.O. BOX		Apt., cinc			H-NO-599,LIG PHASE					
		· ·			1,URBAN	ESTA	TE DUGRI			
City/Town		Country			Province/State			Postal Code		
LUDHIAN	IA	India			PUNJAB			141013		
	NAL INFORMATION					0				
7.	Full name of institution	on			8. Designated learning institution number					
	Yorkville University				019396019511					
9. Address of Institution										
P.O. Box		Street No.			Street Name					
		2000			Steeles Ave	#	est			
City/Tow	n	Province/Territory			Postal Code					
Concord		Ontario			L4K 4N1		12 T	pe of School/Ins	titution	
10.	1 Ciopiione	ct.	11. Fax l				() Pu			
	905-669-0544 n	/a	905-	695-1389		:1	() FC	DIC (X)THVac		
13. Website					14. Email international@yorkvilleu.ca					
www.yorkvilleu.ca				D - '11'						
15. Name of Contact				Position Admissions Ad			905-669-0544 1571			
	Janine Barroso			Position	011371441301					
16.	Name of Alternate Co Simone James	ontact			Director, Enrolment		905-669-0544 1223			
_	, Emonnenc		700 000 00							
	INFORMATION		Hours of		18 Ei	old/Dr	ogram of Stud	<i>y</i>		
17. Academic Status (X) Full-time () Pa		1=10=1=10=12:100 00000						of Business Administration		
					Bacileioi oi Busilies			, Administration		
				13	20. Type of Training Program					
19. Level of Study						()Vocational (X) Academic () Professional ()				
	Post-Secondary Degree				Other					
24 Fush area Brogram					22. Estimated tuition fee for the first academic year					
21. Exchange Program					\$11,940.00					
() Yes (X) No					Fees Prepaid (x) Yes () No					
				Amount of Prepaid Fees: \$ 7,182.50						
23. Scholarship/Teaching Assistantship/Other					24. Internship/Work Practicum					
Financial Aid: () No					() Yes Length:					
(x) Yes Specify: \$3000 for the 1st academic year				() No Field of Work:						
25	sible									
25.	Conditions of accept	unec ep -								
26. Length of Program (YYYY/MM/DD)					27. Expiration of letter of acceptance (YYYY/MM/DD)					
20.	Start date: 2018/07									
	Completion date: 2020/12/27				2018/7/16					
			ull-time studie	es .						
28.	Other relevant infor	mation:								
	In addition to the tui	tion fees	s, students pay	y an inter	national fee	of \$3,7	35.00 for the f	irst academic yea	r.	
						1				

Signature of Institution representative (Registrar):

Printed name of institution representative: Karim Sukhiani, Registrar, Yorkville University



Receipt

Date: May 29, 2018

Jaskirat Kaur

Student ID: 2018040187

Payment Type: Wire transfer

Reference Number: May 29, 2018

Total Amount Paid: \$7,182.50 CAD

Katherine Benjamin

Manager, Student Finance