



COQUITLAM COLLEGE

Established 1982

LETTER OF ACCEPTANCE

Date (YYYY/MM/DD): 2018-08-02

PERSONAL INFORMATION

| | | | | | |
|-----------|---|-----------|------------|-------------------------------|------------------|
| 1 | Family Name | | 2 | Given Name Pardeep Kumar | |
| 3 | Date of Birth (YYYY/MM/DD) 1999 / 08 / 22 | | 4 | Student ID Number 02191022 | |
| 5 | Certificat d'acceptation du Québec (CAQ) or Ministère de l'Immigration, Diversité et Inclusion (MIDI) letter <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | |
| | | | CAQ Number | | Expiry |
| | | | N/A | | N/A / / |
| 6 | Student's full mailing address | | | | |
| P.O. Box | | Apt./Unit | | Street no. | Street name |
| | | | | VPO Kandhwala Hazar | Khan Sekh Subhan |
| City/Town | | Country | | Province/State | Postal Code |
| Fazilka | | India | | Punjab | 152123 |

INSTITUTIONAL INFORMATION

| | | | | | |
|----------------|---|--------------------|--|--|---|
| 7 | Full name of institution Coquitlam College | | 8 | Designated learning institution number DLI#O19244321962 | |
| 9 | Address of institution | | | | |
| P.O. Box | | Street no. | | Street Name | |
| N/A | | 516 | | Brookmere Ave. | |
| City/Town | | Province/Territory | | Postal Code | |
| Coquitlam | | BC | | V3J 1W9 | |
| 10 | Telephone number | Extension | 11 | Fax number | 12 |
| 604 - 939-6633 | | | 604 - 939-0336 | | Type of School/Institution <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private |
| 13 | Website www.coquitlamcollege.com | | | 14 | |
| | | | Email admissions@coquitlamcollege.com | | |
| 15 | Name of contact | Position | | Telephone number | Extension |
| Chris Rands | | Vice-Principal | | 604 - 939-6633 | |
| 16 | Name of alternate contact | Position | | Telephone number | Extension |
| Will Eckford | | Principal | | 604 - 939-6633 | |

PROGRAM INFORMATION

| | | | | | |
|--|---|---|---|---|--|
| 17 | Academic status | Hours of instruction per week | 18 | Field/Program of Study | |
| <input checked="" type="checkbox"/> Full-time <input type="checkbox"/> Part-time | | 12-15 | Two-Year Associate of Arts Degree Program | | |
| 19 | Level of study Post-Secondary | | 20 | Type of training program | |
| | | | <input type="checkbox"/> Vocational <input checked="" type="checkbox"/> Academic <input type="checkbox"/> Professional <input type="checkbox"/> Other | | |
| 21 | Exchange program | | 22 | Estimated tuition fee for the first academic year | |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | \$12,859.00 / 2 semesters | | |
| | | | Fees prepaid: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | |
| 23 | Scholarship/Teaching assistantship/Other financial aid: | | 24 | Internship/Work Practicum | |
| <input type="checkbox"/> Yes Specify: _____ | | | <input type="checkbox"/> Yes Length: _____ | | |
| <input checked="" type="checkbox"/> No | | | <input checked="" type="checkbox"/> No Field of work: _____ | | |
| 25 | Conditions of acceptance specified as clearly as possible Mature Student | | | | |
| 26 | Length of Program (YYYY/MM/DD) | | 27 | Expiration of letter of acceptance (YYYY/MM/DD) | |
| Start date: 2019 / 01 / 07 | | Or minimum 2 years of full-time studies | 2019 / 01 / 18 | | |
| Completion date: 2020 / 12 / 31 | | | | | |
| 28 | Other relevant information: This program is offered under the written consent of the Ministry of Advanced Education effective September 2013 having undergone a quality assessment process and been found to meet the criteria established by the ministry. Nevertheless, prospective students are responsible for satisfying themselves that the program and the degree will be appropriate to their needs (for example, acceptance to potential employers, professional licensing bodies, or other educational institutional). | | | | |

Signature of institution representative (e.g., Registrar):

Printed name of institution representative: Serena Zeng