



2025-02-07

### Letter of Acceptance

Dear Sukhpreet Kaur ,

Congratulations! Sukhpreet Kaur , Western Community College is pleased to welcome you to the Early Childhood Education program. You have met all the requirements for entry into this program.

The term start date for your program is 2025-04-07.

If you are not a Canadian Citizen or a Permanent Resident, you are required to apply for and receive a Study Permit to attend this program in Canada. This "Letter of Acceptance" will be required as part of your application process. This letter does not guarantee your admission to Canada or permission to remain in Canada. Please upload a copy of your study permit to mywcc.ca system from your student portal once you have received it. International students also require adequate medical insurance, for the entire duration of your studies.

Once again, congratulations on your acceptance into Early Childhood Education Program . We wish you all the best to pursue your program.

Sincerely,

**Parminder Kaur Dhaliwal**

Registrar,


Western Community College



## Information Required for Immigration

<b>Student Personal Information:</b>			
01	Family Name(s):	02	Given Name(s): Sukhpreet Kaur
03	Student Date of Birth (yyyy-mm-dd): 1999-07-10	04	Student Number: WCC1026714
05	Certificat d'acceptation du Québec (CAQ) or Ministère de l'Immigration, Diversité et Inclusion (MIDI) letter: No		
06	Student Mailing Address: 14276 Melrose Drive, Surrey, British Columbia, V3R 5R4, Canada		

<b>Institutional Information:</b>					
07	Full Name of Institution: Western Community College		08	Designated Learning Institution Number: O19396094295	
09	Address of Institution: #201 8318 120 Street, Surrey, BC, Canada, V3W 3N4				
10	Institutional Telephone Number: 604-594-3500		11	Institutional Fax Number: 604-594-3505	
12	Types of School / Institution: Private				
13	Institutional Website: <a href="https://wcc.ca">https://wcc.ca</a>		14	Email: <a href="mailto:info@wcc.ca">info@wcc.ca</a>	
15	Name of Contact:	Position:	Telephone Number:	Extension:	
	Parminder Kaur Dhaliwal	Registrar	604-594-3500	NA	
16	Name of Alternate Contact:	Position:	Telephone Number:	Extension:	
	Gurpal Dhaliwal	President	604-594-3500	NA	

<b>Program Information:</b>					
17	Academic Status: Full Time	Length of Program: 36 weeks	18	Field / Program of Study: Early Childhood Education	
19	Level of Study: Certificate		20	Type of Training Program: Academic	
21	Exchange Program:		22	Estimated Tuition Fee for Program: \$23,390.00	
	No			Fee Prepaid: 4,310.00	
23	Scholarship / School Assistance: No		24	Internship / Work Practicum: 484 Hours	
25	Conditional Acceptance specified as clearly as possible: None				
26	Length of Program (years): 0.65				
	Program Start Date:	2025-04-07		Program End Date:	2025-12-01
27	Expiration of Letter of Acceptance (yyyy-mm-dd):		2025-05-07		
28	Signature of Institutional Representative: 		Name of Institutional Representative: Parminder Kaur Dhaliwal Registrar		

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