



School of Continuing Education and Skilled Trades
555 Bonaccord Street, Peterborough, Ontario K9J 7B1
Phone Number 1-888-269-6929 EXT: 2211, FAX 705 741-3279
Attn: Rita Dillio

TICO Education Exam Proctor Registration Form (BUSN 108)

Surname: _____ First Name: _____

Address: _____

City: _____ Prov: _____ Postal Code _____

Telephone: Day: _____ Evening: _____

Email: _____

Date of Birth: (dd/mm/year) _____

Indicate Exam period:

Travel Counselor Exam 90 Minutes _____

Supervisor/Manager Exam 60 Minutes _____

Travel Counselor-Supervisor/Manager 150 Minutes _____

Please choose one of the following dates to write your TICO Education Standard Exam.

(Be sure you have registered with CITC at www.citc.ca/ticoexam 14 days prior to this exam and paid the exam fee of \$35.00 + GST).

Date of Exam	Check-In	Exam Time	Room No.	Select Choice
Wednesday, November 16 th , 2011	6:45 pm	7:00 pm	308	
Wednesday, December 14 th , 2011	6:45 pm	7:00 pm	308	

Proctor venue fee is \$32.02, indicate method of payment:

() MasterCard () Visa Card Number _____
 Expiry Date: _____ Card Holder Name: _____

Signature _____

Return th form by FAX Attention Rita DiIlio 705 741 3279