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Mock Exam Registration

First Name:

Last Name:

Address:

City:

Province:

Postal Code:

Tel: ()

E-mail:

Country of origin:

How did you hear about us:

University:

Year of Graduation:

Please indicate what Mock exam you are preparing for:

Mock Exam I Mock Exam II Mock Exam Date:

Note: Mock Exam Application should be received no later than two weeks before the date of Mock Exam

Fee: \$300+HST=\$339

Please send your cheque with the registration form to the above address.

This fee covers ten OSCE stations and review session after exam.

Note: No refund after registration, even if the candidate fails to show up on the exam

Please make your cheques payable to “Ontario IMG School”.

Please **FIRST fill out** this registration form, **THEN** print and **mail by express or registered mail** to the address given above.

For further information please visit the website at: www.ontarioimgschool.com

I have read and accepted the terms and conditions of this registration form.

Date:

Signature: