RENIC

2300 Ryan Road Courtenay, BC V9N 8N6 T: 1-800-715-0914 E: forms@nic.bc.ca

Type or print in CAPITAL LETTERS using black or dark blue ink.

Last Name: ______

First Name: _____

Student Number:

.....

Email – the pdf document will be sent to your North Island College student email address.

| Generic Letter of Enrollment | Applying for a Study Permit extension |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Applying for a US VISA Inviting Family Member Applying for a temporary resident visa (TRV) Renewing passport Applying for an amendment or change to Study Permit | Applying for a Study Permit Extension Applying for a Bridge Extension (short extension of Study Permit) Anticipated Completion Applying for a Study Permit Extension with Co-op/ Internship |
| Employment | Anticipated Completion |
| Other: | Applying for a Co-op/Internship Work-Permit Anticipated Completion |

If you require an Official Transcript, you must submit a request online through myNIC or in person at the Registration Office. Official Transcripts are \$10.00 and are mailed to the address we have on file.

Requests will not be processed for students who have an outstanding account balance. Documents will be released to a third party only with written authorization from the student. A third party must bring photo ID.

I confirm that I am currently enrolled and that the mailing address listed on myNIC is current and accurate. I understand that if I am not enrolled and there is no Canadian mailing address on file, this request will not be processed. I understand that I will be required to resubmit the request once enrolled and/or once my address is updated.

Date (mmm-dd-yyyy)

FREEDOM OF INFORMATION/ PROTECTION OF PRIVACY

I understand that this information, along with subsequent information, is collected under the authority of the College and Institute Act. This information will be protected and used in compliance with the BC Freedom of Information and Protection of Privacy Act.

FOR SRO USE ONLY

Date Received:

Received By: