



Homeopathic Institute of North America

56 Nasmith Street, Brampton, Ontario, L6S 4Z5, Canada

Tel: (905) 456-9090 Fax: (905) 456-9294

APPLICATION FORM

Please use BLOCK capitals

Date of Birth

SIN number *(If Applicable)*

Dr / Mr / Ms / Mrs.
(circle one)

Name *(Last, First)*

Address

Address *(con't)*

Tel. *(Preferred)*

Tel. *(Alternate)*

E-mail

Qualifications

Course selection *(Circle one)*

1. Correspondence 2. Three year full-time
3. Three year part-time 4. Other

**Have you ever committed a criminal offense
for which no pardon has been issued? Y / N**

*****Please attach photocopy(s) of your certificates with the application*****

Signature

Date