PERSONAL EVALUATION FORM



NAME:				
ADDRESS:				
Telephone:	(h	ome)		(cell)
I would like to receive more infordatabase. □	mation on up	ocoming course st	tart dates. I conse	ent to be added to your
E-mail:				
Course of interest:				
I would like to start my studies:	Next month	Three months	Six months	
I would like to attend:	Day	Evening	Saturday	
Please Note: All personal inform privacy is protected	ation collecte	ed by Internation	al Beauty Institu	te is confidential and you
(For office use only)				
Accepted				
Accepted with Advanced Standing				
Accepted with Scholarship				
Denied entrance				
Educational Consultant:				

Please tell us how you are going to ensure that you will be a successful student in this college:
Do you have any physical health concerns or health restrictions that you need to tell us about?:
Please list current skills that may relate to your course of interest:
Canadian High School Graduate: Yes No
Additional Education: Canadian University College Other Country Private School
Name of Course:Course Length:
Course Completed?: Yes No
List work experience- please provide a brief description:
Please select one or more of the following, as it applies to you:
My present job is: I am unemployed unfulfilling/boring I love my job
Other:
I think that training will help me: succeed in my chosen field upgrade my skills
meet my goals
Other:
My career is held back because: not enough knowledge not enough skills need more training
Other:

I can learn most easily by: seeing and doing having an instructor show me
reading on my own
Other:
When it comes to working, I: work best alone work best as a leader work well with others
Other:
When it comes to making decisions: I can make them myself I need to consult I do a lot of research I tend to procrastinate Other:
My best qualities are: people person Passionate about work friendly outgoing
Other:
The greatest rewards of working are: Higher income enjoying the job growth potential
Other:
My ability to understand new material: average above average may need one-on-one help
Other:
When I am faced with a problem I always: ask for help try to solve on my own go to a qualified person
Other:
I wish to attend International Beauty Institute because: Quality Education I want to experience small classes I like the location I was referred
Other:
How did you hear about our school?
Do you have any friends that would benefit from training at our college?
Name:Tel:Email:
APPLICANT SIGNATURE: Date