

F**PAYMENT FORM**

Student's Full Name:

Nom of Payer:

Address of the Payer:

3. PAYMENT BY CHEQUE OR MONEY ORDER*Please use the following information to make a payment by cheque or money order.*Please make the payment payable to : **Conseil scolaire catholique du Nouvel-Ontario**

Please attach the cheque or money order to the form and send it to:

**International Student Program Manager
Conseil scolaire catholique du Nouvel-Ontario
201, rue Jogues, Sudbury, Ontario
P3C 5L7 CANADA**

I confirm that I have made a payment by cheque or money order for the amount of CAD \$ _____ to the Conseil scolaire catholique du Nouvel-Ontario.

Signature: _____

Date: jj / mm / année

Please return the completed form by email to paul.delariva@nouvelon.ca or by mail to **Paul de le Riva, International Student Program Manager at the Conseil scolaire catholique du Nouvel-Ontario, 201 Jogues St., Sudbury, Ontario P3C 5L7 CANADA.**