



Giselle's  
School of Aesthetics

## APPLICATION FORM

(please print)

Name: \_\_\_\_\_ Birth date: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Email: \_\_\_\_\_ Social Insurance No: \_\_\_\_\_

I would like space reserved for me in the following course: (please check one)

Aesthetics (Body)

**(Face & Body + Nail Technician)**

*Spa Treatments for Body*

*Spa & Treatment Facials*

*Spa Manicures*

*Spa Pedicures*

*Introduction to Aromatherapy*

*Hair Removal Technique*

*Introduction to Nail Art*

*Introduction to Artificial Nails*

*Lash & Brow Tinting & Shaping*

*Introduction to Make-up Artistry*

Nail Technician

*Manicures*

*Pedicures*

*Spa Treatments*

*Introduction to Aromatherapy*

*Introduction to Nail Art*

*Introduction to Artificial Nails*

Electrolysis

*(Permanent Hair Removal)*

*Electrolysis*

*Thermolysis*

*The Blend*

Skin Care Technician

*Spa Treatments for Body*

*Spa & Treatment Facials*

*Full Body Massage*

*Hydrotherapy Treatments – Vichy Shower*

*Firming, Toning & Detoxifying Treatments*

*Sunless Tanning Treatments*

*Introduction to Aromatherapy*

*Hair Removal Technique*

*Lash & Brow Tinting & Shaping*

*Introduction to Make-up Artistry*

**ENTRANCE DATES :** May 4/09 September 8/09 November 2/09

*Preferred Date:* \_\_\_\_\_

*Alternative Date:* \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**Ensure that your Fee and Applicant's Questionnaire is attached to this application form**

Mail or deliver Fee, Application Form and Questionnaire to:

**Giselle's School of Aesthetics Ltd.**

**249 St. Mary's Road**

**Winnipeg, Manitoba R2H 1J5**

*This application is made under the rules and regulations administered by the Department of Labour and by The Private Vocational Institutions Act and the regulations made under that Act.*

Questions? Please call us at 948-0910 or email us at [Study@GisellesSchool.ca](mailto:Study@GisellesSchool.ca)