



# The Institute of Law Clerks of Ontario

20 Adelaide Street East, Suite 502, Toronto, Ontario M5C 2T6

Tel: 416.214.6252 Fax: 416.214.6255 [www.ilco.on.ca](http://www.ilco.on.ca)

## ALTERNATE PROVINCIAL EXAMINATION

### ESTATES

**INSTRUCTIONS:** Please complete all information requested on the exam registration form. The completed form together with your **\$200.00** payment should be sent to the Institute marked to the attention of the Education Coordinator.

Cheques or money orders are payable to THE INSTITUTE OF LAW CLERKS OF ONTARIO. Postdated cheques are not accepted.

To pay by VISA or MasterCard, please fill in the credit card section of the registration form. Remember to write the cardholder's name (cardholder must sign form), card number, CVC and expiry date. Registrants paying by VISA or MasterCard can fax their registration form to (416) 214-6255 or email to [education@ilco.on.ca](mailto:education@ilco.on.ca) Please keep fax confirmation as proof of having submitted your registration.

Registrations will not be processed unless the registration form is properly completed; signed, dated, and the appropriate fees are included.

**ALTERNATE ESTATES EXAMINATION-SATURDAY, OCTOBER 20, 2018 AT 1:00 P.M. THE EXAM IS WRITTEN AT THE ILCO EDUCATION CENTRE, 20 ADELAIDE STREET EAST, TORONTO. NO OTHER TIME OR LOCATION IS PERMITTED. PLEASE ARRIVE BY 12:30.**

**This examination is closed book** and is scheduled for two and one half (2 ½) hours following a fifteen (15) minute reading period. The exam is worth 100 marks. Students should expect the exam will consist of multiple choice, true/false or matching questions completed on a Scantron sheet as well as a variety of short answer questions, brief case scenarios and/or calculations. A simple calculator is permitted. **Cell phones may not be used as calculators. Please bring both pencil and pen for the exam.**

#### **ALTERNATE PROVINCIAL EXAMINATION REGISTRATION DEADLINE**

**Registration deadline for the Examination is midnight October 5, 2018**

**The registration form must be completed and received by the Institute before the registration deadline.**

**SPACE IS LIMITED. NO LATE REGISTRATIONS WILL BE ACCEPTED.**

*Continuing Education • Fellowship • Professional Development*

**REGISTRATION FEE:**

**The exam fee for the alternate exam is \$200.00. Please note that fees are not transferrable from one examination to another.**

**REFUND POLICY:**

Requests for examination fee refunds **must be submitted in writing** to the Institute at least **ten (10) business** days prior to the examination date in order to be entitled to a refund. Refund requests are subject to a \$25.00 administration fee. Any refund request received by the Institute less than ten (10) business days prior to the examination date, will be submitted to the Institute's Education Committee for review and consideration.

**EXAMINATION RESULTS:**

A grade report will be mailed to each examinee, at the address indicated on the Provincial Registration Form, **45 days** after the examination date. Verbal Provincial Examination results will not be provided under any circumstances.

ILCO provides a Certificate to students upon successful completion of the Associate Program. In order to be a full graduate of our program you must successfully complete the four provincial examinations.

**WRITTEN EXAMINATIONS**

All submitted written examinations will become the property of the Institute. All examination papers will be destroyed 2 years after the examination date.

**NO RIGHT OF APPEAL**

**Students writing the alternate exam will not have the right to appeal their grade. There will not be an opportunity to view your graded exam paper.**

**ALTERNATE PROVINCIAL ESTATES EXAM  
REGISTRATION FORM**

**Exam Date: Saturday, October 20, 2018 Time: 1:00 P.M.**

**Exam fee: \$200.00**

**Exam location: ILCO Education Centre, 20 Adelaide Street East, Suite 503, Toronto.**

Name _____	
Address: _____	
City _____	Province: _____ Postal Code: _____
Telephone: _____	Email: _____

Course taken:  In class  Online  Self- study

Course taken at: \_\_\_\_\_

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**Payment Information**

Payment by  cheque  Visa  MasterCard

**Credit Card Authorization \$200.00**

Name of Card Holder: \_\_\_\_\_

Card No. \_\_\_\_\_

Expiry date: \_\_\_\_\_ CVC #: \_\_\_\_\_

Cardholder's signature: \_\_\_\_\_

By signing this registration form I hereby acknowledge and agree to be bound by all policies of The Institute of Law Clerks of Ontario ("ILCO") and that my final grade may be released to the college after the grade is sent to me. (Signature below constitutes approval).

\_\_\_\_\_  
Student's signature

\_\_\_\_\_  
Date

Office use
AUTHORIZATION _____ RECEIPT # _____
DATE OF PAYMENT _____