Student Application Form

Personal Information	
☐ Mr. ☐ Ms. Last Name:	First Name:
Preferred Name:	
Date of Birth:	Nationality (ie passport / used):
(MM/DD/YYYY)	
Age:	
Status in Canada: check what applies Are you:	Email Address:
rac you.	
☐ International Student:	Address:
☐ Do you need a Study Permit?	
☐ Canadian Permanent resident	
☐ Canadian Citizen	City
☐ Visitor visa/ permit.	City
☐ Other Please explain:	Postal Code
DI GUIDI	Province/ State
Phone: Cell Phone:	- Country
☐ Home Phone:	
What Program are you interested in:	
When would you like to start the program:	(MM/YYYY)
Education Background	
High school graduate?	Graduation year
College/University?	Graduation year
Degree/Diploma Earned	
Other training or work experience:	
Do you have a copy of an English Official Test Sco	ore?
TOEFLTWEIELTS	
Score Year	
Language proficiency information - evidence:	
☐ Official certificate from one of the above testin	g services.
☐ College "in house" test	

PLEASE READ THE FOLLOWING AND SIGN	
I hereby agree that the College may collect, use and disclose my personal information for the purposes of providing enrolling me in the program, and to verify the accuracy of the information I have provided.	
The information I have provided to the College is true to the best of my knowledge	
Further, I acknowledge that I have received and understand the program information and related College policies.	
Applicant's Signature Date	

<u>Student Application Checklist – please work with your program advisor.</u>

□ Application fee
☐ Complete and signed student application form
☐ Copy of High school or post-secondary diploma and transcript
☐ Copy of valid passport
☐ Copy of valid study permit (If available)
☐ Proof of English Proficiency (If Available)
OR
☐ Successful completion of Entrance Assessment prior to acceptance / enrolment
☐ Proof of Canadian citizenship or Permanent Resident Status (If applicable)