INTERNATIONAL STUDENT APPLICATION FORM
(PAGE 1 of 2)

Please type or print clearly with ink in BLOCK LETTERS.
Applications can only be considered complete, when they are signed by an applicant and returned with payment.

PERSONAL INFORMATION

☐ Miss. ☐ Ms. ☐ Mr. ☐ Mrs.		☐ Female ☐ Male	Date of Birth	____ / ____ / ____ Year Month Day	
Last/Family Name		Student Telephone			
First Name		Student Email			
Second Name		Country of Citizenship			
Student Address	House address				
	City				
	Province/State/Prefecture				
	Country				
	Postal Code				
Do you have family in Canada? If so, in what cities:					

ENGLISH PROFICIENCY

☐ I do have an English Proficiency score
IELTS score of _____ IBT TOEFL score of _____
Other (specify) _____

☐ I do not have an English proficiency score
Scheduled Test Date ____ / ____ / ____ (Year / Month / Day)
☐ Test not yet scheduled

ACADEMIC INFORMATION

Level of education completed: ☐ Secondary School ☐ College ☐ University
(Tick all that apply)

All applications for post secondary programs require copies of secondary school, college and/or university transcripts and diplomas/degrees. Copies of all documents must be submitted in the original language and also in English.

PROGRAM SELECTION			Anticipated Start Date
ESL	☐ Beginner ☐ Intermediate ☐ Advanced		
EAP	☐ EAP *(IELTS 5.5 or TOEFL 70 is required for entry.)*		
POST-SECONDARY	#1 Choice		
	#2 Choice		
	#3 Choice		

Confederation COLLEGE

PRIMARY EMERGENCY CONTACT (in your home country)

In the event of an emergency, this is the first person we would contact on your behalf.

Name		Phone (home)	
Relationship		Phone (cell)	
Email		Phone (work)	
Country		English Speaker	☐ YES ☐ NO

STUDENT SIGNATURE

1) I certify that the information included in this application is true and complete. I understand that any false or incomplete information submitted in support of my application will invalidate my application. _____. (initialize)

2) I give Confederation College permission to release any relevant information regarding my application to Citizenship and Immigration Canada. _____. (initialize)

3) I give Confederation College permission to share information regarding my admission to the following person or agency. _____. (initialize)

Student Signature: _____ Date: _____

APPLICATION FEE PAYMENT : $95.00 CAD

Payment can be made by:

Visa or MasterCard by calling the International Education Centre at 1(807)475-6467

or

Electronic Funds Transfer to Confederation College using the following banking information:

Bank:	ROYAL BANK OF CANADA
Address:	1159 Alloy Drive, Suite 100 Thunder Bay, Ontario, Canada P7B 6M8
Swift Code:	ROYCCAT2
Account Transfer Number:	03966-003-000-0018

PLEASE RETURN THIS COMPLETED APPLICATION FORM TO:

International Admissions
internationaladmissions@confederationcollege.ca

Final assessment of this application cannot be made until all supporting documents and the application fee are received.

It is the applicant's responsibility to obtain all documents and visas to legally enter and study in Canada.

The personal information requested on this form is collected, used and/or disclosed in accordance with the relevant statutory and regulatory provisions of the Ministry of Training, Colleges and Universities Act R.S.O. 1990, c E.2 and the Ontario Colleges of Applied Arts and Technology Act, 2002 O. Reg 34/03. The information that is being provided will be used to determine your eligibility to enroll and study at Confederation College.

Should you have any questions concerning your personal information please contact the Privacy Officer at (807) 475-6267. Confederation College is committed to the protection of the personal privacy of all individuals.