

**Tel** (905) 890-7833 **Fax** (905) 507-1195 **international@queenscollege.ca**  121 Brunel Road, Mississauga, ON L4Z 3E9 205-100 Cowdray Ct, Scarborough, ON M15 1A1 www.queenscollege.ca

## INTERNATIONAL STUDENT APPLICATION

Application fee: \$150

1. PERSONAL INFORMATION							
Family Name		Given Nam	е				
Date of Birth (YYYY/MM/DD)	Nationality:						
Gender:	☐ Male	☐ Female					
2. STUDENT CONTACT INFORMATION							
Mailing Address:				Apt.#			
City/Town	Province/Territory		Postal Code				
Phone	Alternative Phone		Email				
Permanent Address: (if different from above)							
City/Town Province/Territory			Postal Co	ode			
Phone	Phone Email						
3. AGENT INFORMATION (if applicable)							
Agent Name:	Contact Per	Contact Person:					
City/Town	Province/Territory	Countr	Country Postal Code				
4. PROGRAM OF INTEREST							
Choice	Program Title		Start Date	Campus			
1.							
2.							
5. ENGLISH PROFICIENCY - IELTS							
☐ IELTS Overall:	Date Completed:	Date Completed:		Indicate upcoming test date:			
Listening	Reading	W	riting	Speaking			
ENGLISH PROFICIENCY - TOEFL							
☐ TOEFL iBT Overall:	Date Completed:		Indicate upcoming test date:				



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## **EDUCATION - PASSING AND PERCENTAGE OBTAINED.**

EDUCATION		YEAR OF COMPLETION	OVERALL PERCENTAGE			
	High School					
Post-Secondary (Bachelors, Diplomas)						
Others						
	If there is any gap, please provide specific information					
6.	CHECK LIST					
	☐ Completed and signed International Student Application Form   ☐ Translated and notarized secondary education diploma   ☐ Translated and notarized secondary education transcript   ☐ Translated and notarized post-secondary education diploma   ☐ Translated and notarized post-secondary education transcript   ☐ Proof of English Proficiency   ☐ Copy of a valid passport					
7.	DECLARATION / RELEASE OF II	NFORMATION				
	I declare that the above information is true and complete. I understand that any incomplete information submitted in support of my application may valid my application and result in the withdrawal by the College of any offered place, and that withdrawal may take place any time during my enrollment and my information will be given to Canada Immigration. I authorize Queen' College of Buisness, Technology & Public Safety to obtain any details relating to my academic record at the College listed with the application in order to evaluate my application and to release information regarding the status of my application to my agent.					
	REFUND POLICY					
	rejection of study permit fr retained as an administration	und in the event of visa denial com the Consulate of Canada. In on fee. For any other reason, if t ined as an administration fee.	n this case \$150 will also be			
	Signature of Applicant:	Date:				
		2) of the Freedom of Information and information on this form is collected un				

In accordance with section 39(2) of the Freedom of Information and Protection of Privacy Act, you are advised that the personal information on this form is collected under the authority of the Ministry of Colleges and Universities Act, R.S.O, 1990 and Regulation 770. It will be used by Queen's College of Business. Technology & Public Safety personnel only for relevant College activities and may be used for statistical and administrative reporting purpose of the College. No personal information will be made available to third parties.