

International Student Program Adult and Vocational Education Student Application Form





STUDENT INFORMATION		J	
FAMILY NAME :	_GIVEN NAME :	MIDDLE NAME :	
BIRTH DATE : Year / Month	/ Day	GENDER	: MALE FEMALE
PERMANENT ADDRESS :	Address		
	Address		
	City	Postal Code	Country
	City		Country
FIRST LANGUAGE :		OTHER LANGUAGE(S):	
WRITTEN LANGUAGE :		READ LANGUAGE :	
COUNTRY OF BIRTH : FATHER'S FAMILY NAME :		CITIZENSHIP : FATHER'S GIVEN NAME :	
MOTHER'S FAMILY NAME:		MOTHER'S GIVEN NAME:	
E-MAIL ADDRESS :		PHONE NUMBER:	
	TION		
MEDICAL INFORMA	ATION		
Do you have any on going medical coll fyes, please describe :	onditions that you wisl	n to specify?	Yes No
EDUCATION			
High School Diploma (completed) High School Diploma (not completed) 🗆	Vocational Training (complete Post-Secondary Education (c	
HOW MANY YEARS HAVE YOU TA	KEN ENGLISH CLAS	SES?	
In School 1 year 2 y	ears 3 years	☐ 4 years ☐	5 years More
Private Lessons 1 year 2 year	ears 3 years	☐ 4 years ☐	5 years More
PROGRAM SELECTION			
Accounting (5731) Professional Cooking (5811) Sales Representation (5823) Hairdressing (5745)	Machining Techr Restaurant Servi	niques (5723) Profecces (5793) Desk uction and Maintenance Mech	ing and Fitting (5695) essional Sales (5821) top Publishing (5721) anics (5760)
ADDITIONAL INFORM			
How did you find out about this progr	am?		
Friend or Family Canadian Education Center	Education Fair Canadian Embas	ssy/Consulate	
Newspaper/Magazine	_	•	gazine (specify) :
Website	Website :		
Other			
SIGNATURES			
STUDENT'S SIGNATURE :			
PARENT'S/GUARDIAN'S SIGNATURE (IF MINOR) :			Year/Month/Day
FOR OFFICE USE Year/Month/Day			
STUDENT'S PERMANENT CODE : SOCIAL INSURANCE NUMBER :			
COMPARATIVE STUDIES EVAL. ATTACHED			