



Student Application Form

NEW EXTENSION ADD

PERSONAL INFORMATION

| | | | |
|--|---------|--------------------------|-----------------|
| Family Name: | | Given Name: | |
| Male | Female | Date of Birth: | M D Y |
| Mailing Address | Street: | City: | |
| Province: | | Country: | Postal Code: |
| Telephone No: | | Fax No: | |
| E-mail Address: | | Nationality: | |
| • Current Visa Type or Status in Canada? | | Student | Visitor |
| | | Working Holiday | Other _____ |
| • How did you hear about VIC? | | Agency _____ | Internet |
| | | Education Fair _____ | Friends |
| | | Newspaper/Magazine _____ | Other _____ |

English Program

| | | | |
|----------------------------|------------------------------|---|-------------------------|
| Full-Time (25 hrs/week) | Semi Full-Time (20 hrs/week) | English for Children & Families (ages 7-14), hours: _____ | |
| AM Part Time (15 hrs/week) | PM Part Time 2 (10 hrs/week) | PM Part Time 1 (5 hrs/week) | Other _____ |
| ■ Starting Date: M | D | Y | ■ Duration: _____ weeks |
| Current Level of English | Elementary | Intermediate | Upper Intermediate |
| | | | Advanced |

Career Program

| | Campus | Program | Duration | Start Date (mm/dd/yyyy) |
|-----------|-----------|-----------------|----------|-------------------------|
| Example | Vancouver | TESOL Full Time | 4 weeks | 02/07/2017 |
| Program 1 | | | | |
| Program 2 | | | | |
| Program 3 | | | | |
| Program 4 | | | | |

Please indicate the official English proficiency test score here and send us a copy of the test result:
 Test Type: _____ Score: _____
 Test Date (mm/dd/yyyy): _____
 Test Type: _____ Score : _____
 Test Date(mm/dd/yyyy): _____

HOMESTAY APPLICATION

| | |
|--|---|
| ■ Do you need a homestay? Yes No | ■ Duration: _____ (weeks/months) |
| ■ Check-in date: M _____ D _____ Y _____ | ■ Check-out date: M _____ D _____ Y _____ |
| • I prefer (please check) | |
| Pets No Pets No Preference | • Are you vegetarian? Yes No |
| Children No Children No Preference | • Do you smoke? Yes No |
| Other host students No other host students No Preference | |
| • Allergies / Special medications / Health problems / etc: | |
| • Additional Comments or Information: | |
| ■ Do you need airport pick up service? One way Two ways No | Arrival Date: _____ |
| Airline: _____ Flight Number: _____ | Arrival Time: _____ |

I declare that the information I have provided is true and correct. I've read and understand all of VIC's policies on admissions, dispute resolution, dismissal, refunds, English only policy, and vacation.
 As such, I acknowledge that I will be held subject to the terms, conditions, and policies contained herein.

Signature of Student: _____ Month _____ Day _____ Year _____