INTERNATIONAL APPLICATION 2300 Ryan Road, Courtenay, BC, Canada, V9N 8N6 Phone: +1.250.334.5033 | Fax: +1.250.331.0809

Email: iadmissions@nic.bc.ca | Website: www.nic.bc.ca/international



## FULL LEGAL NAME: This information must match your Passport—no initials.

	<u> </u>									
	Last Name		First and Middle Names					Male	Fema	le
	Date of Birth (day/month/year)		Country of Birth					Citizenship		
Ä	Mailing Address (Apartment #, House #, Street Name)									
DAT	City. Drawin es /	Ctata	Country			Doetal Codo		Talanhana		
PERSONAL DATA	City Province/State		Country			Postal Code		Telephone		
PERS	Mailing Address in Canada (Apartment #, House #, Street Name)		City	Province		Postal Code		Telephone		
	Mail correspondence to:  Student Email Address (Required)									
	Mailing Address Mailing Address in Canada									
	Emergency Contact Name		Relationship		Email Add	Iress		Telephone		
	Study authorization will be: Study Permit Visitor's Visa Minister's Permit Other (please specify):									
	I want to study NIC's English Language program	Yes	No Year:	St	art Term:	Sept 0	ct Jan	Feb	May	June
ΨV	I want to study a university/college program	Yes		St		Sept Ja	ın May			
PROGRAM	First Program Choice Second Program Choice									
PRO	Dual Admission Pathway: Royal Roads Unive	University of Northern British Columbia Vancouver Island University								
	Guaranteed Admission Pathway: University of Victoria Vancouver Island University Portland State University Emily Carr University						ty			
	Will you be studying at NIC as an exchange student?  How long do you plan to study at NIC?	No Name of exchange institution								
	RELEASE OF INFORMATION (if applicable)									
	I hereby authorize North Island College to release any of the following items: application information, admissions status, Letter of Invitation or Acceptance, transcripts, progress and attendance records to:								cords to:	
z	Representative/Agent Name									
IATIO	Are you applying under SPP India SPP  Relative/Friend Name	China	SPP Other:							
ORN				Email Au	iaress					
OF INF(	DECLARATION: Please read the following before signing:  1. I declare that the information I have submitted on the application is true and correct. Falsifying any document or information submitted will result in the immediate cancellation of admission or registration at NIC.									
DECLARATION & RELEASE OF INFORMATION	2. I understand that this information along with subsequent information is collected under the authority of the College and Institute Act. This information will be protected and used in compliance with the BC Freedom of Information and Protection of Privacy Act for the purpose of admission, registration, research, and other purposes consistent with the mandate of the institution.									
1 & R	or the institution.  3. I understand that submission of this application does not quarantee admission to a program or course, and that admission is subject to meeting NIC's program requirements and space availability.									
RATION	4. I agree to abide by the rules and regulations of NIC as published in the Calendar, those of the department and program in which I shall be registered, and any changes which may be made while I am a student at NIC.									
CLA	5. I understand that NIC has the right to cancel any program due to low registration.									
DE	<ul> <li>I understand where NIC is located and which program I have chosen.</li> <li>I have read and understand the International Education Refund Policy – please see web link <u>www.nic.bc.ca/international</u>.</li> </ul>									
	Applicant's Signature	Date (day/month/year)								
الاس										

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## FULL LEGAL NAME: This information must match your Passport—no initials.

	TOLE LEGAL NAME. This information must match your russpo	ore no iniciais.								
- DATA	Last Name	First and Middle Names	Male Female							
PERSONAL DATA	Date of Birth (day/month/year)	Country of Birth	Citizenship							
	Name of last school attended	1	From (year)	To (year)						
	Address of last school attended	City		Province/State						
ND										
EDUCATIONAL BACKGROUND	Country	Postal Code	Grade/Form/Level completed or Diplo	) iploma						
ONAL BA	Please indicate your main activity during the past year:									
ATI	Attending Secondary School Attending College	Attending University								
DOC	Other Educational Institution Working	Other:								
	Please indicate where you were located during the past year:									
	In British Columbia In another province	In another country								
APPLICATION CHECKLIST PAYMENT	\$100 Canadian non-refundable application fee payment options:  Cash — \$100 Canadian funds (do not mail/courier)  Credit card can only be received by fax# +1.250.331.0809 (Click HERE to download fax form)  Certified Cheque or Money Order (Canadian funds only) Reference #  1. \$100 Canadian non-refundable application fee  2. Copy of photo page from passport  3. For English language programs, a high school graduation transcript  4. For other programs, completion of ONE OF: NIC Academic English Prep Program; OR BC Grade 12 English C+; OR CAEL 60; OR IELTS 6.0 no band below 5.5; OR TOEFL iBT 80 no section below 19; OR TOEFL 550 (Code 8538).  5. Official/notarized copy of your educational documents, and a certified copy translated into English (if original language is not English).  6. Your signature on application form.									
	Email all documents to <u>iadmissions@nic.bc.ca</u> in one single attachmo									
NIC USE ONLY	Entered by:	Date:	Time:	Student #:						
	Application fee received: Yes No									
NIC	2									
	Program:									