



Intended Start Date: September January May Year: _____

Intended Program

Aircraft Maintenance Technician Diploma	Land and Water Resources Diploma
Early Childhood Education and Care Diploma	Business Management Diploma
Associate of Arts Degree	Executive Assistant Diploma
Associate of Arts Degree (Health Studies)	Business Management Diploma – Accounting Option
Associate of Science Degree	Interactive Technologies and Game Design Diploma
Social Services Worker Diploma	Other: _____
English as a Second Language (EASL)	

Post-Degree Diploma:

Business Management	Business Management – Health Administration Specialization
Business Management – Information Technology Specialization	

Campus Preference

Dawson Creek Fort St. John Chetwynd No Preference

Reason for choosing campus: _____

The right to determine the campus lies with Northern Lights College, according to the space in the program and location of the program, we will consider a preference if possible.

Personal Information (based on your passport)

Surname/Last Name _____ First Name _____

Gender Male Female Other Preferred Name _____ Date of Birth (yy/mm/dd) _____

Country of Citizenship _____ Passport Number _____

Mailing Address _____

City _____ Province/State _____ Country _____

Postal Code _____ Telephone _____ Email _____

Release of Information

If you wish to allow NLC to share information about your application with a family member, friend, or other representative, please include their contact info below.

First Name _____ Last Name _____ Relationship _____

Country _____ Telephone _____ Email _____

Agency Information

Please complete this section if you are using a representative to help you with this application.

Name of Agency _____

Country _____ Telephone _____ Email _____

Previous and Current Education

Last High School Attended _____

Country _____ Grade Completed _____ Year of Completion _____

Last Post-Secondary School Attended _____

Country _____ Grade Completed _____ Year of Completion _____

IELTS Score

Listening _____ Reading _____ Writing _____ Speaking _____ Overall _____

TOEFL iBT Score _____ Other English Language Assessment _____

Release of Information

I hereby authorize Northern Lights College to release any of the following items: application information, admissions status, Letter of Offer or Acceptance, transcripts, progress and attendance records to my agent, and/or the person I have named on my application form.

Declaration

Please read the following before signing:

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 the College.

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 this institution.

I understand that submission of this application does not guarantee admission to a program or course, and that admission is subject to meeting NLC's prerequisites and space availability.

I agree to abide by the rules and regulations of NLC as published in the Calendar and 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 NLC.

I understand that NLC has the right to cancel a program due to low registration.

I understand that only students who provide written proof from the Canadian High Commission that their Study Permit was denied will be eligible for a refund tuition deposit less a \$300 Processing Fee. The written proof must be submitted within 3 months of the date of the letter from the Canadian High Commission.

I understand that it is the student's responsibility to confirm admission requirements, application procedures, transfer credit, and graduation requirements at all receiving institutions.

Declaration

When completed and signed, this document is confidential.

I hereby certify that all of the information on this application is true and complete. I agree to abide by Northern Lights College rules and regulations, including payment of fees.

Signature _____ Date _____

If under the age of 19, I authorize Northern Lights College to release my academic records to my parents.

Signature _____ Date _____

Check List

Academic Transcripts (This is not required for our EASL Program).

Copy of passport photo and address pages.

English Language Test Score Report (For example, IELTS. This is not required for our EASL Program).

Send your completed application and all other required documents to: info@international.nlc.bc.ca.

If you are in India, Philippines or South East Asia please send your application to the corresponding email below:

India — india@nlc.bc.ca

Philippines — NLC-Philippines@nlc.bc.ca

South East Asia — SEasia@nlc.bc.ca

NLC will send you an email with instructions for application fee payment.