

Application For Admission



International Office
1500-543 Granville Street, Vancouver, BC, V6C 1X8
Tel: 1.604.689.4328
Email: international@sprottshaw.com

PART 1. PERSONAL INFORMATION

LEGAL LAST NAME	LEGAL FIRST NAME	LEGAL MIDDLE NAME
PREFERRED FIRST NAME (IF APPLICABLE)	GENDER <input type="checkbox"/> <input type="checkbox"/>	DATE OF BIRTH (DD/MM/YYYY) / /
CELL PHONE NUMBER	HOME PHONE NUMBER	EMAIL ADDRESS

Permanent Address in Home Country		Current Mailing Address (if different from Home Country)	
Apartment Number, Street Name and Number		Apartment Number, Street Name and Number	
City	Province/State	City	Province/State
Country	Postal Code	Country	Postal Code

Emergency Contact			
Name	Relationship to you	Telephone Number	Email Address

Status in Canada

☐ Canadian Citizen / Permanent Resident ☐ Will apply for Canadian Study Permit ☐ Working Holiday Visa

☐ Study Permit ☐ Work Permit ☐ Visitor Record Expiry Date (dd/mm/yyyy): / /

*Please note that a study permit is required for programs longer than 6 months

PART 2. PROGRAM OF INTEREST

What program are you interested in?

When would you like to start this program? (dd/mm/yyyy) / /	Which campus do you prefer to attend?
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PART 3. EDUCATION HISTORY

SECONDARY (HIGH SCHOOL) INFORMATION			
CREDENTIAL AWARDED	INSTITUTION	COUNTRY	FROM (MM/YYYY) TO (MM/YYYY) / /

POST SECONDARY (COLLEGE OR UNIVERSITY) INFORMATION			
CREDENTIAL AWARDED	INSTITUTION	COUNTRY	FROM (MM/YYYY) TO (MM/YYYY) / /
CREDENTIAL AWARDED	INSTITUTION	COUNTRY	FROM (MM/YYYY) TO (MM/YYYY) / /

PART 4. EMPLOYMENT BACKGROUND

EMPLOYER	POSITION	COUNTRY	FROM (MM/YYYY) TO (MM/YYYY) / /
EMPLOYER	POSITION	COUNTRY	FROM (MM/YYYY) TO (MM/YYYY) / /

PART 5. HOW DID YOU HEAR ABOUT SPROTT SHAW COLLEGE?

☐ Newspaper ☐ Friend/Relative ☐ Student ☐ Radio ☐ TV
☐ Facebook ☐ Internet ☐ Education Consultant / Agency ☐ Other

Education Consultant / Agency Information			
Company Name	Contact Person	Phone Number	Email Address

My primary reason for attending Sprott Shaw College is: (indicate only one)

- | | | |
|--|--|--|
| <input type="checkbox"/> To complete a diploma, or certificate | <input type="checkbox"/> To prepare to transfer to another institution | <input type="checkbox"/> To qualify to enter another program |
| <input type="checkbox"/> To learn new job skills | <input type="checkbox"/> To decide on a career or change careers | <input type="checkbox"/> To improve existing job skills |
| <input type="checkbox"/> To improve basic skills (upgrading) | <input type="checkbox"/> Personal interest/self-development | <input type="checkbox"/> Other _____ |

PART 6. START DATES

Monthly Intakes (Classes start every four weeks)

PART 7. ADMISSION REQUIREMENTS

Diploma/Certificate Program Requirements

- High School diploma with transcript or equivalent/proof of GED or Mature Student Status
- Transcript from post-secondary institution (if applicable)
- Proof of English Language Proficiency

Language Requirements

- **Business, Hospitality, Childcare & Design:** Proof of English (IELTS 5.5 or equivalent) **OR successful completion of SSC Entrance Exam**
- **Post Graduate Diploma:** Proof of English (IELTS 6.0 or equivalent) **OR successful completion of SSC Entrance Exam**
- **Post Graduate Certificate in Nursing & Health Care Assistant:** Proof of English (IELTS 6.0 or equivalent)
- **Practical Nursing:** Proof of English (IELTS 7.0 or equivalent) **AND successful completion of SSC Healthcare Communication course with SSC Entrance Exam**

Documents Required

- Copy of Passport
- Copy of valid study permit (If applicable)

*All documents must be in English or Notarized Translation.

*For Health Care and Child Care programs, please refer to program outline for additional admission requirements and documents.

PART 8. APPLICATION PROCESS

1. Submit the completed and signed Admission Form
2. Pay a non-refundable application fee
3. Submit the required documents for admission
4. Once accepted, a tuition deposit is required to confirm and reserve space
5. Once the tuition deposit has been received, an official Letter of Acceptance will be issued

PART 9. STUDENT SERVICES

Do you require student hotel / homestay arrangement and / or airport pickup? ☐ Yes* ☐ No

*If you checked "YES", please fill out the student service application form and email to studentservice@sprottshaw.com
For more information on student hotel and how to apply, please visit www.studenthotel.ca

Do you require temporary medical insurance? ☐ Yes* ☐ No

*If you checked "YES", please fill out student service application form and email to studentservice@sprottshaw.com

I hereby confirm my understanding and acceptance of the information provided above and attest to the accuracy of the information I have provided. Further, I acknowledge that I have read and understand the information in the Student Handbook, and refund policies posted on Sprott Shaw College website.

Note: Admissions requirements can not be waived by either the College or the student.

Applicant's Signature (Required)

Date (dd/mm/yyyy)

Witness (Office Use Only)