



INTERNATIONAL STUDENT APPLICATION

PERSONAL INFORMATION PLEASE PRINT CLEARLY USING CAPITAL LETTERS.

Last (Family) Name _____ Given (First) Name(s) _____

Full Name as in your passport _____

Male Female

Date of Birth _____ Year _____ Month _____ Day _____

Country of Residence _____ Nationality _____

Have you applied to George Brown College before? No Yes If yes, what is your Student ID #? _____

PERMANENT ADDRESS IN HOME COUNTRY

Street Number & Name _____ Apartment Number _____

City _____ Province/State _____ Country _____

Postal/Zip Code _____ Email _____

Home Telephone Number _____ Fax Number _____

CURRENT MAILING ADDRESS (IF DIFFERENT FROM ABOVE)

Street Number & Name _____ Apartment Number _____

City _____ Province/State _____ Country _____

Postal/Zip Code _____ Email _____

Home Telephone Number _____ Fax Number _____

PROGRAM SELECTION

POSTSECONDARY PROGRAM – DIPLOMA/CERTIFICATE/POSTGRADUATE/DEGREE

Program Priority	Program Title	Program Code	Start Date
1st Choice			Year _____ Month _____
2nd Choice			Year _____ Month _____

INTENSIVE ENGLISH PROGRAM (IF REQUIRED)

8 Weeks 16 Weeks 24 Weeks 32 Weeks 40 Weeks 48 Weeks

Start Date Year _____ Month _____ Day _____

PAYMENT INFORMATION

Payments can be made by Bank Draft/Money Order, Certified Cheque, Credit Card (Visa/Master Card/AMEX), Bank Transfer (with corresponding bank in Canada).

BY CREDIT CARD

Card Type AMEX Master Card Visa

Card Number _____

Expiry Date (Month/Year) _____

Cardholder's name (please print) _____

Cardholder's signature _____

BY BANK TRANSFER

Bank Name	The Bank of Nova Scotia
Bank Address	44 King Street West, Toronto, Ontario, Canada
Account Holder	George Brown College
Account Number	91132-0417610
Transit Number	47696-002
SWIFT Code	NOSCCATT
Routing Number	026002532

- The applicant's full name and student ID number should be quoted on the bank transfer form.
- CAD \$15.00 should also be added to cover the Bank of Nova Scotia service charge. The sending bank may also levy a service charge.
- A copy of the receipt from the sending bank should be sent to us, as proof of payment.

BY BANK DRAFT/CERTIFIED CHEQUE Payable to: GEORGE BROWN COLLEGE

EMERGENCY CONTACT (FAMILY OR FRIEND ONLY – NOT AGENT CONTACT)

Last (Family) Name _____ Given (First) Name(s) _____

Home Telephone Number _____ Alternative Telephone Number _____

Email _____

Do you need Homestay Service? Yes (Please submit the Homestay Application) No

Do you need Airport Pick-up (with Homestay Service only)? Yes No

Did you enclose the following?

- Translated and notarized transcripts from senior secondary school and/or other level of education
- Translated and notarized secondary school diploma and/or diploma(s) from other level of education
- TOEFL or IELTS or other internationally recognized test report, if you have
- CAD\$65.00 — Application fee (non-refundable)
- Photocopy of passport page containing photo and personal information

If you are accepted, how would you like to receive your offer letter?

- Call for pick up (if you are in Toronto)
- Mail/Courier
- Scanned copy via email

AUTHORIZED AGENT NAME & ADDRESS, IF APPLICABLE (AFFIX STAMP OR LABEL)

HOW DID YOU HEAR ABOUT GEORGE BROWN COLLEGE? (PLEASE CHECK ALL THAT APPLY)

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> GBC Website | <input type="checkbox"/> Other Website | <input type="checkbox"/> Canadian Embassy/Consulate | <input type="checkbox"/> Private ESL School |
| <input type="checkbox"/> Education Fair | <input type="checkbox"/> Guidebook/Magazine | <input type="checkbox"/> Relative/Friend | <input type="checkbox"/> Agent |
| <input type="checkbox"/> Other – please specify _____ | | | |

DECLARATION

I certify that the above information is true and complete. I understand that any false or incomplete information submitted in support of my application may invalidate my application and result in the withdrawal by George Brown College of an offered seat at any time during my enrollment. I understand that if I am required to undertake a field, internship, externship, co-op, clinical placement, or work practicum within the first and second semesters of study, it is my sole responsibility to apply for a co-op work permit along with my study permit application to ensure that I can begin my academic work placement as scheduled. Please refer to www.cic.gc.ca for more details on all immigration documents.

Applicant's name (please print) _____

Applicant's Signature _____ Date _____

Please mail, courier or submit in person the completed application form, supporting documents and \$65 non-refundable application fee to the address below:

**George Brown College
International Centre
200 King St. E. , Main Floor
Toronto, ON M5A 3W8
Canada**

Telephone: 416-415-5000 ext. 2115
Fax: 416-415-2120
Email: international@georgebrown.ca
Website: georgebrown.ca/international

Freedom of information: The information on this form is collected under the legal authority of the Ministry of Colleges and Universities Act R.S.O. 1980, Chapter 272, s. 5, R.R.O. 1980 regulation 640. The information is used for the administration and statistical purposes of the college and/or ministries and agencies of the Government of Canada. For further information please contact the Registrar, George Brown College, P.O. Box 1015, Station B, Toronto, Canada M5T 2T9

