

COLLEGE / UNIVERSITY APPLICATION FORM

Personal Information

Gender :	Prefix :
First Name :	Middle Name :
Last Name :	
Citizenship :	
Date of Birth :	(DD/MM/YYYY)
Address 1 :	Address 2 :
Address 3 :	Address 4 :
City :	Postal Code :
Province :	Country :
Email Address :	
Student's Mobile Number :	
Parent's Number :	

THE CONTACT INFORMATION GIVEN ABOVE IS 100% VERIFIED AND DULY ATTESTED BY STUDENT

Release of Information/Agents/Partners [\(Click on below check box\)](#)

You are using an agent to handle inquiries related to your application.

Application Details:

College/Uni. Name:	Intake:	
Program:		
Choice 1:	Program Code:	Campus:
Choice 2:	Program Code:	Campus:
Choice 3:	Program Code:	Campus:

DECLARATION:

I certify that the contact information and program selection is given in this form is true and of my choice. I am aware that submission of FLASE or INCOMPLETE information on my part will not allow me to access my application, student portal & email service. I authorizing you to access my details on behalf of me for this application.

Applicant Signature :

Applicant Name :

Date (DD/MM/YYYY) :