



## INTERNATIONAL STUDENT APPLICATION FORM (Calgary)

### I. PERSONAL INFORMATION (appears in your passport)

|                |                               |                                 |              |               |  |
|----------------|-------------------------------|---------------------------------|--------------|---------------|--|
| Last Name:     |                               |                                 |              |               |  |
| Given name:    |                               |                                 |              |               |  |
| Gender:        | <input type="checkbox"/> Male | <input type="checkbox"/> Female | Nationality: |               |  |
| Date of birth: | dd                            | mm                              | yy           | Passport No.: |  |

### II. STUDENT CONTACT INFORMATION

|                        |  |        |  |          |  |
|------------------------|--|--------|--|----------|--|
| Street/Apartment Name: |  |        |  |          |  |
| City:                  |  | State: |  | Country: |  |
| Contact Number:        |  |        |  |          |  |
| Email:                 |  |        |  |          |  |

### III. ACADEMIC INFORMATION

|                     |  |          |  |  |  |
|---------------------|--|----------|--|--|--|
| Level of Education: |  |          |  |  |  |
| Year Graduated:     |  | Program: |  |  |  |

### IV. COURSE PREFERENCES

| Program Choices | Program Title | Start Date |
|-----------------|---------------|------------|
| 1st Choice      |               |            |
| 2nd Choice      |               |            |
| 3rd Choice      |               |            |

### V. HOW DID YOU KNOW ABOUT BAY RIVER COLLEGE?

|   |  |  |
|---|--|--|
| <input type="checkbox"/> Agent                                  | <input type="checkbox"/> Internet      | <input type="checkbox"/> Relative/Friend |
| <input type="checkbox"/> Our Website                            | <input type="checkbox"/> Info. Session | <input type="checkbox"/> Other, _____    |
| <i>If from the agent, please specify the name of the agent:</i> |  |  |

### VI. AGENT INFORMATION

|                        |  |                 |  |          |  |
|------------------------|--|-----------------|--|----------|--|
| Company Name:          |  |                 |  |          |  |
| Street/Apartment Name: |  |                 |  |          |  |
| City:                  |  | Province:       |  | Country: |  |
| Email:                 |  | Contact Number: |  |          |  |

### VII. EMERGENCY CONTACT

|                        |  |                  |  |          |  |
|------------------------|--|------------------|--|----------|--|
| Full Name:             |  |                  |  |          |  |
| Street/Apartment Name: |  |                  |  |          |  |
| City:                  |  | State:           |  | Country: |  |
| Contact Number:        |  |                  |  |          |  |
| Email:                 |  |                  |  |          |  |
| Relationship to you:   |  | Language Spoken: |  |          |  |

## APPLICATION CHECKLIST

- Completed signed Student Application Form
- CDN \$150.00 Application Fee (non-refundable)
- CDN \$50.00 Airport Pick-Up (optional)
- Translated & Notarized transcript from highest level of education
- Proof of English Proficiency

## PAYMENT INFORMATION

### By Credit Card

|   |                                      |                               |  |
|---|--------------------------------------|-------------------------------|--|
| Cardholder's Name (appears in your card): |                                      |                               |  |
| Card Number:                              |                                      | Expiration date (mm/yy):      |  |
| Credit Card Information:                  | <input type="checkbox"/> Master Card | <input type="checkbox"/> Visa |  |
| Signature:                                |                                      |                               |  |

### Bank Transfer Information

|                  |                 |                  |                          |
|------------------|-----------------|------------------|--------------------------|
| Beneficiary Bank | TD Canada Trust | Bank Account No: | 5013165                  |
| Bank No.:        | 4               | Transit No.:     | 8088                     |
| Swift Code:      | TDOMCATTOR      | Routing No.      | (from US only) 026009593 |

Bank Address: 252-Aspen Glen Landing SW, Calgary, Alberta, T3H 0N5, Canada  
Tel No.: 1.403.292.2808 Fax: 1.403.292.2805

## 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 invalid my application and result in the withdrawal by Bay River College of an offered seat at any time during enrolment. I Authorized Bay River College to obtain any details relating to my academic records, in order to evaluate my application, and to release information regarding the status of my application.

**Applicant's Name:** \_\_\_\_\_

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### BAY RIVER COLLEGE CALGARY

1-3516 26 St. NE, Calgary  
Alberta, Canada T1Y 4T7  
Tel: 1.403.457.6400  
Fax: 1.403.457.6410