



INTERNATIONAL STUDENT APPLICATION FORM

Personal Details (Name MUST be as it appears on Passport)

Gender: Male Female Undeclared Date of Birth (DD/MM/YYYY): _____/_____/_____

Family Name: _____ First Name _____ Middle Name: _____

Country of Citizenship: _____ Passport Number: _____

Address in Home country: _____

Postal Code: _____ Country: _____ Home Country Telephone Number: _____

Address in Canada (If In Canada): _____ City: _____

Postal Code: _____ Province: _____ Telephone Number: _____

Applicant Email Address: _____

Agent OR Representative Information

Are you using an Agent or Someone else as a representative for this application? Yes No

If Yes, please provide following information: Agent / Representative Name: _____

Agent/Agency ID#(if applicable): _____ Email Address: _____

Education qualification

Highest Academic Qualification Completed: _____ Year Completed: _____

Is English your first language? Yes No If NO, have you taken any English Tests (i.e., IELTS, TOEFL, CAEL) Yes No

Name of English Test Taken: _____ English Test Score: _____ Date Test Taken: _____

Postsecondary Program (Please Choose the program you are interested in)

Program Name	Program Duration	Pre-Requisite	Preferred Start Month
<input type="checkbox"/> Diploma of Business Administration	52 Weeks	N/A	
<input type="checkbox"/> Advanced Diploma of Business Administration	28 Weeks	Diploma of Business Administration	
<input type="checkbox"/> Diploma of Business Management	34 Weeks	N/A	
<input type="checkbox"/> Advanced Diploma of Business Management	36 Weeks	Diploma of Business Management	
<input type="checkbox"/> Diploma - Accounting and Payroll Administrator	48 Weeks	N/A	
<input type="checkbox"/> Diploma – Web Designer	51 Weeks	N/A	
<input type="checkbox"/> Diploma – Medical Office Assistant with Unit Clerk	52 Weeks	N/A	

Declaration

IN SIGNING THIS APPLICATION FOR ENROLMENT:

I declare that the information contained in this application is true and valid. I authorize Canadian National Institute of Business to release and obtain information related to study permit from Citizenship and Immigration Canada. I have read and understood the terms and conditions of Enrolment, and the Postsecondary Program information that I am seeking admission into.

I understand that it is mandatory to inform the college about any change in my personal information within 7 days of occurring that includes phone number, email address and mailing address. I have the financial capacity to meet tuition fees and agree to pay fees as they become due.

Signature of Applicant: _____ Date (DD/MM/YYYY): _____

Document Checklist: Please submit the following applicable documents:

Completed and Signed "International Students Application Form"

English Language Test Result Sheet

Certified copies of Academic Qualification/s

For documents not in English, certified Translated copies

Non-Refundable Application Fee