



in association with



# Application form UTP Stage I/UTP Stage II

Please print in BLOCK LETTERS

## Personal details

|  |
|--|
| Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other |
| Family name:   |
| Given names:   |
| Preferred name:  |
| Date of birth: DD / MM / YY  |
| Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female  |

## Contact details

|   |
|---|
| Address in Canada (if known):   |
|   |
|   |
|   |
|   |
| Address in home country (must be applicant's address, not agent's address): |
|   |
|   |
|   |
|   |
| Postcode:   |
| Mobile telephone:   |
| Home telephone:   |
| Applicant's email (mandatory):  |

## Nationality/Citizenship

|   |
|---|
| Country of birth:   |
| Nationality:  |
| Passport number:  |
| Do you hold Permanent Resident status in Canada? <input type="checkbox"/> Yes <input type="checkbox"/> No |

## English proficiency

|   |
|---|
| IELTS or TOEFL score:   |
| Other:  |
| Will you be studying English in Canada before starting at FIC? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If "Yes", name of school:   |
|   |
| When? (Dates) DD / MM / YY  |

## Education details

### Secondary Education – highest level achieved

|  |
|--|
| Name of qualification (e.g. Year 12, HKDSE or 'A' Levels): |
|  |
| School attended:   |
|  |

Completed:  Yes  No

|   |
|---|
| Date Completed/Due to Complete: MM / YY |
| Country/State:                          |
| Language of instruction:                |

### Post-secondary and further education

|                        |
|------------------------|
| Name of qualification: |
|                        |
| Institution attended:  |
|                        |

Completed:  Yes  No

|   |
|---|
| Date Completed/Due to Complete: MM / YY |
|---|

Please attach certified copies of all academic transcripts or mark sheets.

## Employment history

If you believe you have relevant employment experience, please attach details.

## Program selection

Please complete the relevant section for each program you wish to undertake. You must complete both the FIC and SFU sections.

### Fraser International College (FIC)

#### Pre-University Level

UTP Stage I

#### University Level

UTP Stage II: Arts and Social Sciences

UTP Stage II: Business Administration

UTP Stage II: Communication, Art and Technology

UTP Stage II: Computing Science

UTP Stage II: Engineering Science

UTP Stage II: Environment (Arts)

UTP Stage II: Environment (Science)

UTP Stage II: Health Sciences

#### Commencement

Please indicate the year and term you wish to begin your studies.

Year: \_\_\_\_\_  January  May  September

### Simon Fraser University (SFU)

Preferred program (if known):

Preferred major (if known):

## Personal information

I consent to FIC collecting, storing, and using my personal information in the manner and for the purposes set out in FIC's Privacy Policy, which includes admission, registration, graduation and other activities related to FIC's programs, and communication with me regarding my program, courses, campus and student activities and opportunities and the programs and services offered by FIC. I hereby consent to FIC disclosing my personal information to third parties in the manner set out in FIC's Privacy Policy, which includes:

- disclosure to enrolment agents acting on my behalf
- disclosure to SFU to process my application(s) to transfer from FIC to SFU
- disclosure to the SFU Residence and Housing Department in support of my application for student housing at SFU
- disclosure to Navitas Limited and its affiliates for the purpose of communication regarding programs and services offered by Navitas Limited and/or its affiliates

I acknowledge that if I do not consent to the collection, storage, use and/or disclosure of my personal information, I may withdraw my consent by written notice to FIC (see the FIC Privacy Policy for contact information), provided that despite such notice, FIC will be permitted to collect, use and disclose personal information in accordance with the applicable legislation.

## Request for learning support

FIC provides academic accommodation to students with disabilities (for example, mobility, sight and hearing impairments and reading, writing or other impairments that adversely affect learning, such as attention-deficit hyperactivity disorder). Upon acceptance to the program, we encourage you to advise us of any impairments that may affect your full participation in the FIC curriculum so that we may accommodate your needs.

For more information, please see the Disability Support page of the FIC website ([fraseric.ca](http://fraseric.ca)) or contact us by email at [info@fraseric.ca](mailto:info@fraseric.ca) or by telephone on +1 778 782 5011.

## Medical insurance requirements

I understand FIC will provide mandatory 12 months of medical coverage upon arrival in Canada. At the end of the 12 months I will have the option to extend the initial coverage or apply for the British Columbia Medical Services Plan.

## Other information

How did you first learn about FIC? You may tick more than one.

- Exhibition/seminar
- Newspaper/magazine
- Recommended by a friend/relative
- Recommended by an education agent
- Internet
- Other

Please specify:

## Application checklist

### Check that you have:

- Completed all sections of the application form
- Read and understood the Conditions of Enrolment including the Fee Refund Policy on page 28 of the student guide or on the website at [fraseric.ca/apply-today/conditions-of-enrolment](http://fraseric.ca/apply-today/conditions-of-enrolment)

### Check that you have attached:

- Certified copies of your academic qualifications
- Evidence of your English language ability, if required
- A copy of your passport, study permit or birth certificate, if required
- Any relevant employment documentation, if required

## Declaration

- I authorize FIC and SFU Residence and Housing Department to share any information pertaining to my application, welfare or status while I am a student with FIC.
- I authorize FIC to obtain official records from any other educational institution attended I have attended.
- I declare that the information I have supplied on this form is, to the best of my understanding and belief, complete and correct. I understand that giving of false or incomplete information may lead to the refusal of my application or cancellation of enrolment. I have read and understood the published course information in this brochure or on the FIC website and I have sufficient information about FIC to enrol.
- I understand that fees may increase. I accept liability for payment of all fees as explained in this brochure or on the FIC website, and I agree to abide by the Fee Refund Policy and Withdrawal Policy which is current at the time of my studies at FIC. I have also read the section in this brochure or website relating to costs of living and I understand that living expenses in Canada may be higher than in my own country and I confirm that I am able to meet these costs.
- I understand that after I commence my FIC program, I must complete a minimum of 30 units before I am eligible to transfer for SFU.

### Applicant's signature:

(must be the same signature as in your passport)

Date: DD / MM / YY

If you are under 19 years of age, your parent or guardian must also sign this application form.

### Parent's/guardian's signature:

Date: DD / MM / YY

## Application submission

This application form has been submitted in:

City:

Country:

**Unsigned applications cannot be processed.  
Agents may not sign on behalf of the applicant.**

### Address your application to:

Fraser International College  
c/o Simon Fraser University  
8999 Nelson Way  
Burnaby, British Columbia  
Canada V5A 4B5

### Enquiries:

T +1 778 782 5011  
F +1 778 782 5101  
E [admissions@fraseric.ca](mailto:admissions@fraseric.ca)  
W [fraseric.ca](http://fraseric.ca)

## Representative details

Representative's stamp

**A.E.Q. Siddique**  
Managing Partner  
Student Connection International

Representative name:

Representative office code:

Recruiter's name:

Recruiter's email address: