

International Student Application

(Program Name and Intake Date)

PLEASE READ CAREFULLY AND COMPLETE ALL SECTIONS BY PRINTING CLEARLY.

- Complete all sections of the application form, sign and date. Incomplete forms will not be accepted.
- Include a non-refundable application fee of \$120 CAD (money order, certified cheque, or credit card). Payable using the following link <http://registration.parklandcollege.sk.ca/transactionportal/>
- Provide ALL secondary and post-secondary transcripts including home country and Canada. Original documents should be sent directly from the issuing agency to Parkland College. Documents needing translation may be subject to an assessment fee of \$150CAD.
- Include proof of English proficiency.

PERSONAL INFORMATION

Complete Legal Name (as found on your passport)

Family (Last) Name
First and Middle Names
Preferred Name (if different from First name)
E-mail

Address

Apt. Number, Street, Box Number	
City/Town	
Province/State	
Postal Code/Zip code	Country

Male <input type="checkbox"/> Female <input type="checkbox"/>	Date of Birth ___/___/___ Day Month Year	Country of Citizenship
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EMERGENCY CONTACT

Name (Family Name)	(First Name)
Address	
Telephone (home)	Telephone (Business)
E-mail	Relationship to you

FOR OFFICE USE ONLY

Application Rec'd on: _____
 Application Fee paid by: _____ On: _____ Ref # _____
 Tuition Deposit Rec'd on: _____ Amount: _____ Ref. # _____

EDUCATION

Dates From To	Secondary education	Location	Grade / level completed

POST-SECONDARY EDUCATION - All post-secondary education including Canada.

Dates From To	Post-secondary education	Location	Completed Yes or No

ENGLISH PROFICIENCY

First Language: _____

Proof of English Proficiency is required of all applicants whose first language is not English. Please indicate which proof(s) of proficiency you are providing.

TOEFL

IELTS

A minimum of two successful semesters at a full time postsecondary level of study conducted in English in Canada, USA, Britain, Australia or New Zealand.

AGENTS:

Name of Agent: _____

Company Name: _____

Email: _____

Phone #: _____

Address: _____

DECLARATION

I hereby certify that all the information on this application is true and complete. I understand that false information may invalidate my application and result in cancellation of my admission or status as a registered student. If admitted, I agree to abide by the rules and regulations of the College, including the payment of my fees.

Date

Signature

When completed and signed, this document is confidential.

Send completed application to:

Parkland College

200 Prystai Way

YORKTON, SK S3N 4G4

CANADA

OR international@parklandcollege.sk.ca