



STUDENT APPLICATION FORM

Today's Date:[Date]

Student's Last Name:		Student's First Name:	
Birth date: [Birthday] Sex: <input type="checkbox"/> F <input type="checkbox"/> M		Father's Full Name:	Phone #:
Nationality:		Mother's Full Name:	Phone #:
Mailing Address: Apt & Street #			
City	Province	Country	Postal Code:
Home phone #:		Email	Phone #:
Emergency Contact Name:			Phone #:
Student Residence Status: <input type="checkbox"/> Local <input type="checkbox"/> International			
If you are an international student, please complete Schedule 1 of this document.			
STUDENT INFORMATION			
Last School Attended:		Highest Grade Completed:	Date Completed Latest Grade:
Address of the School:		Unit & Street #	
City	Province	Country	Postal Code
Program(s) of Interest at Yorkland:			
Future Study Plan: <input type="checkbox"/> University <input type="checkbox"/> College <input type="checkbox"/> Other			
Major/Program:		<input type="checkbox"/> Arts <input type="checkbox"/> Computer Science <input type="checkbox"/> Health Science <input type="checkbox"/> Engineering <input type="checkbox"/> Business <input type="checkbox"/> Other	
Other Information we should know? (allergies, disabilities, special requests)			
<p>The above information is true to the best of my knowledge I also authorize YORKLAND HIGHSCHOOL to request any academic background information in order to complete the registration and possible placement process.</p>			
Student Signature			Date
Parent/Guardian signature (if applicable)			Date



STUDENT APPLICATION FORM SCHEDULE 1

INTERNATIONAL PASSPORT INFORMATION

Passport Number:	Issuing Country:	Date of expiry:
Do you hold a Canadian Visa (Study Permit)? <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes,
Current Canadian Visa Number:		
Study Permit Expiry Date:		

ENGLISH LANGUAGE PROFICIENCY

Please note, that English Language Proficiency is UnotU a requirement for admission.

Is English your first language? Yes No

If no, what is your first language?

Was English the language of instruction in your studies? Yes No

If yes, what was the duration of studies?

Have you successfully completed any English Proficiency Test within the last 2 years?

CUSTODIAN PERMISSION (for applicants less than 18 years old)

Guardian's Name:	Phone #:		
Mailing Address: Apt & Street #			
Mailing Address: Apt & Street #			
City	Province	Country	Postal Code
Home phone #	Email	Phone #	

APPLICATION CHECKLIST

Please verify below if your application is complete:

- Registration Fee Payment
- Copy of Academic Transcripts (translated and notarized, where necessary)
- 2 Recent Photographs
- Copy of Passport (with Canadian Visa, if applicable)
- Proof of English Language Proficiency (if applicable)

I declare that the information I have provided on this form is complete and correct. I understand that providing false or incomplete information may lead to the rejection of my application or cancellation of my enrolment. I have gained sufficient information about Yorkland High school to make my decision to enroll in the selected program. I grant York land High school permission to obtain any official academic transcript or education record or other details from the educational institution that I am currently attending or have previously attended.

_____ Applicant's Signature