



# Application Form

Regular Student     Mature Student (19 years or older who has not graduated high school)

## PERSONAL INFORMATION

Gender:  Female  Male

Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

Other Name: \_\_\_\_\_ Date of Birth (MM/DD/YYYY): \_\_\_\_\_

Nationality: \_\_\_\_\_ First Language: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_

State/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Citizenship Status (please tick):  Canadian     Permanent Resident of Canada (Country of Origin: \_\_\_\_\_)

International Student With:     Study Permit     Temporary Resident Visa     Working Holiday Visa

## PROGRAM SELECTION

### Hospitality Management Diploma

With Practicum OR  With Co-op OR  Without Work Experience

### International Hospitality Management Diploma

Without Work Experience

### Hospitality Operations Diploma

With Practicum OR  With Co-op OR  Without Work Experience

Start Date (choose one):

2019     Jan. 7     Feb. 11     Mar. 18     May. 6     Jun. 10     Jul. 15     Sept. 3     Oct. 7     Nov. 12     Other: \_\_\_\_\_

2020     Jan. 6     Feb. 10     Mar. 16     May. 4     Jun. 8     Jul. 13     Sept. 8     Oct. 13     Nov. 16     Other: \_\_\_\_\_

### Extended Hospitality Management Diploma

Without Work Experience (January, May and September start dates only)

### Senior Living Management Certificate

With Practicum

Certificate of Specialization in: \_\_\_\_\_

With Practicum OR  Without Work Experience

## ACADEMIC HISTORY

Name of High School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

Name of College/University: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

Latest Official Test Score (Score Year \_\_\_\_\_):

TOEFL \_\_\_\_\_ IELTS \_\_\_\_\_ TOEIC \_\_\_\_\_ LPI \_\_\_\_\_ OTHER \_\_\_\_\_

## AGENCY INFORMATION (IF APPLICABLE)

Agency Name: \_\_\_\_\_ Contact:  Mr.  Ms. \_\_\_\_\_

## EMERGENCY CONTACT

Mr.  Ms. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

## DECLARATION

I understand the applicaiton must be accompanied with the non-refundable application fee before it will be processed. I certify that the above information is correct to the best of my knowledge.

*(The applicant's guardian must also sign if the applicant is under 19 years of age.)*

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# Credit Card Payment Authorization Form

I, the card holder stated below, authorize Vancouver Premier College to charge the following fees to my credit card:

Card Type:       VISA                       MasterCard                       Union Pay

Cardholder's Name: \_\_\_\_\_

Card Number: \_\_\_\_\_

Card Expiry Date: \_\_\_\_\_

## Charge Details:

Charge Items (select all that apply):

Program Application Fee     Test Fee     Tuition Fee     Other \_\_\_\_\_

Total Amount: CAD \_\_\_\_\_

Student Name (Please print): \_\_\_\_\_

VPC Student ID (if known): \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

Date: \_\_\_\_\_