



<b>Personal Data</b>	Family Name <b>Schmitt</b>	First Name <b>Kim</b>	Middle Name(s) <b>Yves</b>
	Phone <b>+49 173 12345</b>	Fax	E-mail Address <b>kim.schmitt@gmx.com</b>
	Mailing Address <b>Hohe Straße 1, 54678 Hintertupfing</b>		
	Date of Birth (Yr/Mo/Day) <b>1999/11/27</b>	Place of Birth <b>Berlin</b>	Male <input type="checkbox"/> Female <input checked="" type="checkbox"/>
	Passport/Travel Document No. <b>C2J3CTH5R</b>	Country of Issue <b>France</b>	Citizenship <b>Germany</b>
Citizenship status will be: <input checked="" type="checkbox"/> Study Permit <input type="checkbox"/> Other, specify			First Language <b>German</b>
<b>Emergency Contact</b>			
Name <b>Cornelia Schmitt</b>		Telephone <b>+49 173 54321</b>	E-mail Address <b>cornelia.schmitt@gmx.com</b>
Preferred Language <b>French</b>		Relation to student (parent, friend, etc.) <b>Mother</b>	
<b>Name of Agent/Representative Organization/Alumni Referral (if applicable)</b>			
<b>VIU International Student Office Germany</b>			
Contact Name <b>Sabine Sachs</b>		Contact Phone <b>+49 (0) 6151 9674666</b>	Contact E-mail <b>germany@viu.ca</b>
<b>Program Choice</b>	I want to study in VIU's English Language Certificate Program. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		University program students, please indicate your intended major or concentration. (For example a Bachelor of Arts in Psychology, or Bachelor of Science in Biology) <b>Bachelor of Business Administration</b>
	I want to study in a University Program at VIU. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	I want to start my studies: <u>09</u> <u>2019</u> MONTH YEAR		
<b>Educational Background</b>	Name of last school/college/university attended <b>University of Applied Sciences Hintertupfing</b>		City <b>Hintertupfing</b>
	Country <b>Germany</b>		
	Attended from <u>2017</u> to <u>2020</u> <input checked="" type="checkbox"/> Transcript attached, if applicable YEAR YEAR		
	Grade/Form/Level completed or Degree/Diploma earned <b>2nd year completed</b>		
<b>EXCHANGE STUDENTS ONLY</b>			
Home Institution: <b>NOT APPLICABLE</b>		Length of stay at VIU: <b>NOT APPLICABLE</b>	Start date at VIU: _____ MONTH YEAR
<b>Previous Year's History</b>		Please indicate your main activity during the past year.	
<input type="checkbox"/> Attending Secondary School <input type="checkbox"/> Attending College <input type="checkbox"/> Working <input type="checkbox"/> Other Educational Institution <input checked="" type="checkbox"/> Attending University <input type="checkbox"/> Other		Please indicate where you were located.	
		<input type="checkbox"/> in British Columbia <input checked="" type="checkbox"/> in another country (please state which country) <input type="checkbox"/> in another province of Canada <b>Germany</b>	
<b>Type of Payment (\$150 (CDN) Application Fee)</b>			
<input type="checkbox"/> Certified Cheque or Money Order – Reference # _____ <input type="checkbox"/> Bank Transfer – Reference # _____ <input type="checkbox"/> Credit Card: <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> I authorize to charge \$150 (Cdn) to my credit card.			
		<b>Not applicable for students from partner institutions</b>	
Credit Card Number: _____			
Expiry Date: _____ Month Year			
Cardholder's Name: _____			
Cardholder's Signature: _____			
<b>Payment &amp; Declaration</b>			
Please read the following before signing:			
1. I understand that acceptance of this application in no way guarantees admission to a program or course. 2. I understand that my admission is subject to availability of a place for me in the program for which I have applied. 3. I agree to abide by the rules and regulations of Vancouver Island University and of the department and program in which I shall be registered and any changes which may be made while I am a student at VIU. 4. I certify that all statements on this application are true and complete. I understand that misrepresentation of this information in any material way may result in cancellation of my admission or registration status.			
		Date: <b>2019/01/22</b>	
		Signature of Applicant: <b>Please sign manually!</b> <b>No scans/copies can be accepted</b>	
I declare that the statements in this application are complete and correct.			