COLLEGE

## Algonquin College Incoming Study Abroad Application

## Date of Application

| Home Institution | Country |
| :--- | :--- |

## Personal Information

Student Number:

| Date of Birth: (DD/MM/YY) | Sex: | Female <br> Male | Citizenship |
| :---: | :---: | :---: | :---: |

## Current Mailing Address

| Address: |  |
| :--- | :--- |
| City: | Province/State: |
| Postal Code/Zip Code: | Country: |
| Telephone: (Including country code and area code) | Email Address: |

## Permanent Mailing Address (if different from above)

| Address: |  |
| :--- | :--- |
| City: | Province/State: |
| Postal Code/Zip Code: | Country: |
| Telephone: (Including country code and area code) |  |

## Emergency Contact Information

| Name of Emergency Contact: | Relationship: (eg. Mother or Father) |
| :--- | :--- |
| Email: | Telephone: (Including country code and area code) |

English Proficiency (not required for students coming from an institution where English is the medium of instruction)
Please indicate your IELTS or TOFEL score:
Please note, students entering into academic study without taking English for Academic Purposes first will be required to have an Academic IELTS of 6 , with no band below 5.5 or a TOFEL IBT of 80 with minimums of 20 .

Academic Courses Currently in Progress (list in English the courses that you are currently registered in at your home institution)

| Course Name: | Course Number: | Year/Level: |
| :--- | :--- | :--- |
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## Academic Plan

What would you like to include in your academic plan at Algonquin?English for Academic Purposes (mandatory if your English test score are below the requirements outlined in the English Proficiency Section on pg. 2)Academic CoursesApplied Research Project
If you would like to take academic courses at Algonquin College how many months of academic courses would you like to take?4 months8 months
If you would like to participate in the applied research project course, in which field are you interested? (Please note, you must have an academic background in the chosen field to participate)

When would you like to begin your Study Abroad Program at Algonquin College?
Choose one:

## Students with Disabilities or Special Needs

If you have a disability or special needs for which you may require academic accommodations and educational support services, please provide a brief description of the assistance you may need.

## Student Abroad Office or Approval Contact at Home Institution

| Name: | Title: |
| :--- | :--- |
| Telephone: (including country code and area code) | Email Address |
| Address: |  |
| City: | Province/State: |
| Postal Code/Zip Code: | Country: |

## Required Document Checklist

Please submit the following documents with your application:An official transcript of your academic courses and grades (with English translation, if applicable)Proof of language proficiencyCourse selection formSigned approval from your home institution's Study Abroad Advisor or Letter of Permission from your home institution

## Acknowledgement

$\square$ I understand that acceptance as a Study Abroad student does not guarantee access to or registration in all courses offered. Certain courses may not be available to visiting students due to limited enrolment, lack of prerequisites or limited availability.

This information is collected under the authority of the Freedom of Information and Protection of Privacy Act. By submitting this application the Applicant acknowledges and consents that that Algonquin College will necessarily be required to disclose information about the Applicant to the Applicant's home institution, which may otherwise be classified as personal or confidential information, and be protected as such. The Applicant hereby consents to the collection, retention and disclosure of such information for the purpose of facilitating the Study Abroad opportunity contemplated by this application. If you have questions regarding the collection of this information contact the International Education Centre at 613-727-4723 ext. 7031 or visit room C429.

