

International Student Application for Admission

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STATUS	Are you a □ new or □ returning student? If "returning", what is your TRU Student #T = = = = =															
ST/	Did you attend a BC high school, if so what is your P.E.N.?															
PERSONAL INFORMATION	Family Name:															
									<u> </u>	Ì	1]		
	First Name:]		
	Middle Name:		English/Other Name:													
	Mailing Address:															
	City:	Citizenship:														
	Country: Postal Code:				Birthdate: DAY / MONTH / YEAR											
	Student Email:	one:														
	Emergency Contact (Name & Relationship):															
	Emergency Contact Email:															
AGENT	Name of Agency: TRU ID#															
	Address:															
	City:	Contact Name:														
	Country: Postal Code:	Email:														
	Phone:	Mobile Phone:														
CE	When do you want to begin your studies? ☐ September (Fall) ☐ January (Winter) ☐ May (Summer) Year: 20															
	Which program are you applying for?															
CHOIC	(if applying for Masters or Law program please apply online at truworld.ca)															
AM (Will you require English as a Second Language (ESL) studies at TRU? ☐ Yes ☐ No ☐ Don't know															
PROGRAM	Are you a short-term or visiting student? If so, for how many semesters?															
PR	Where did you hear about TRU? □ Education Fair □ Agent □ Facebook □ Web Search □ Friend/Student □ Other															
	STUDENT REFERRAL (If applicable): TRU ID#															
EDUCATION HISTORY	Senior High School Attended:														_	
	From: (year) To: Grade Complet	ed: _						Atta	ch al	l trar	scrip	ts (if	appli	cable	e)	
	All Universities or Colleges Attended: Attach all transcripts (if applicable) GPA:															
		Degrees/Diplomas Granted														
ICAT	2) Dates Attended:	Degrees/Diplomas Granted														
EDU		Date														
	Name of Test (IELTS/TOEFL, other): Overall Scor	e/Res	/Result: Attach official test scores if applicable						e							
															program sentation	
registration and									to the limitation of available resources; (ii) any misrepresentation his application may result in the cancellation of my admission or nich misrepresentation may be shared with other post-secondary romation placed in my student record will be used for the purpose of							
				á	admissio	n, regist	ration, r	ecord	keeping	, statist	cal rese	arch, or	progran	n evalua	rpose of tion and ams and	

nor purposes consistent with the administration of the officers and its programs and services including the programs of student societies/student unions, alumni associations and the Thompson Rivers University Foundation; (iv) my personal information will be reported as required by provincial or federal authority; (v) my admission information may be shared with my current high school as needed and applicable; and (vi) if I am admitted to a program, I am subject to the policies and rules of TRU. I certify that all statements on this application are true and complete and I authorize TRU to verify them.

Signature:	 	 	