## torontoeschool

GIVEN NAME

PERSONAL DETAILS
FAMILY NAME / SURNAME

## APPLICATION FORM for TES COURSES

TITLE

Students should submit the application form to International Admissions office of Toronto eSchool at 41 Metropolitan Rd, Toronto, Ontario, Canada M1R2T5. Tel: (001)416-637-2632 International, (001)647-352-6288. Canada

PREFERRED OR ADOPTED GIVEN NAME

SEX (M/F)		D	DATE OF BIRTH (mm/dd/yy)		NATIONALITY			COUNTRY OF BIRTH		
PASSPORT NUMBER		IS	ISSUING COUNTRY		DATE OF ISSUE			DATE OF EXPIRY		
DO YOU HO	LD A STUDENT VIS	5A?	YES	NO	<u> </u>		<u> </u>			
VISA No.				VISA EXPIRY D	ATE		DATE OF EN	NTRY		
PERMAN	ENT ADDRES	SS								
STREET NUMBER & NAME  APARTMENT NUMBER										
СІТУ			PROVINCE		COUNTRY			POSTAL / ZIP CODE		
TEL.(MOBILE)		W	WECHAT		E-MAIL					
PARENT	'S INFORMA	TION			<u>i</u>					
	FULL NAME		OCCUPATION	DATE	OF BIRTH	TEL. (home)	TEL. (n	nobile)	E-MAIL	
FATHER										
MOTHER										
APPLICA <sup>-</sup>	TION DETAIL	S / PROGRA	AM SELECTION & CO	OMMENCEME	:NT					
Grade		Course								
ENGLISH	LANGUAGE	PROFICIE	NCY							
IS ENGLISH YOUR FIRST LANGUAGE? YES NO IF "NO" WHAT IS YOUR FIRST LANGUAGE?										
WAS ENGLISH THE LANGUAGE OF INSTRUCTION IN YOUR PREVIOUS SECONDARY OR POST-SECONDARY STUDIES? YES NO										
STUDIES DURATION										
HAVE YOU COMPLETED AN INTERNATIONALLY RECOGNIZED TEST OF ENGLISH PROFICIENCY WITHIN THE PAST TWO YEARS?										
YES NO (if <b>YES</b> , please provide details of the test and the official documentation)										

## QUALIFICATIONS

 $Please \ provide \ details \ and \ documentation \ of \ all \ secondary \ studies \ completed \ or \ currently \ being \ undertaken, including \ explanation \ of \ grading \ systems.$ 

		ase attach a separate sheet to provide a		TDV VEAD COMMUNITIES				
FROM (mm/yy) TO (mm/yy)	SC	CHOOL / INSTITUTION	STATE / PROVINCE & COUN	TRY YEAR COMPLETED				
Are you CURRENTLY attempt	ing a final year high school qu	ualification? YES N	10					
If <b>YES</b> , please indicate the date	e when the							
results will be available		DATE(dd/mm/yyyy)						
OTHER INFORMATIO	)N							
HOW DID YOU FIRST LEARN	ABOUT Toronto Eschool	?YOU MAY CHECK MORE THAN ON	Е.					
EXHIBITION / SEMINAR RECOMMENDED BY AN EDUCATION AGENT NEWSPAPER / M.								
RECOMMENDED BY A	FRIEND OR RELATIVE	RECOMMENDED BY A TIC STUI	MENDED BY A TIC STUDENT OR AN ALUMNUS INTERNET					
		The section of the se		TEMPE				
PLEASE SPECIFY THE NAME	: OF THE ABOVE SOURCE							
1 1 1 1								
APPLICATION								
Completed Application For	m with picture ID		Academic Transcripts					
Proof of English Language I	Proficiency (IELTS, TOEFL or a	any other test )						
Registration fee of \$350CAI	D ( Money Order / Bank Draf	ft enclosed payable to Toronto eScho	ol)					
All documents must be origi	inals or certified copies of o	originals (NOT PHOTOCOPIES). Tran	slated documents must be authorized.					
Tuition Fee Refun	d Policy							
2. The tuition of course must be p	aid fully before the course begins.		T included in the tuition fee. udies only after all the tuition and other administ payment. They must fill out "Application for Studer					
DECLARATION								
I, the undersigned, declare that providing false or incomplete in	nformation may lead to the re	ejection of my application or cancella	understanding and belief, complete and tion of my enrollment. After reading TES' to obtain any official education records o	brochure and/or website i have				
educational institution that I ar								
I further declare that I have car	efully reviewed and fully und	derstand the Tuition Fee Policy of TES	I accept liability for payment of all fees a	and other costs.				
APPLICATION FEE PA	YMENT		A non-refundable CAD \$ application for	ee MUST be included with this form.				
Visa	Master Card	American Express	Card Number					
Personal Cheque	Money Order	Bank Draft	Name on Card	Expiry Date (MM/YY)				
Wire Transfer	Cash	Debit Card						
ADDITION 1-10 015 11 -11								
APPLICANT'S SIGNATURE_		DATE						
PARENT/CUSTODIAN'S NAM	ME (print)	SIGNATURE _	DATE					
( if applicant is under 18)	M. 7.							