



## **Personal details**

Title: Mr Mrs Miss Ms Other
Family name:
Given names:
Preferred name:
Date of birth: DAY / MONTH / YEAR
Gender: 🗆 Male 🗆 Female

#### **Contact details**

Address in Canada (if known):		
	Postcode:	
Current Address (must be applicant's address, not agent's address		
	Postcode:	
Mobile telephone: Home telephone:		
Agent's email (if applicable):		

# Nationality/Citizenship

Country of birth:
Nationality:
Passport number:
Do you hold Permanent Resident status in Canada?   Yes  No

## **English proficiency**

IELTS or TOEFL score:

Other:

Will you be studying English in Canada before starting at ICM? Yes No

If 'yes', name of school:

When? (Dates)

#### **Education details**

Secondary Education - highest level achieved

Name of qualification (e.g. Year 12, HKDSE or 'A' Levels):

School attended:

Completed: Yes Year: No

Country/State:

Language of instruction:

Post-secondary and further education

Name of qualification:

Institution and dates attended:

Completed: Yes Year: No

Please attach certified copies of all academic transcripts or mark sheets.

# Study Gap

If you have been out of school for more than 12-months, please provide a brief explanation of what you have been doing until now. (working, short courses, language training, etc)

# **Program selection**

Please complete the relevant section for each program you wish to undertake. If you wish to study at ICM and then at the University of Manitoba, you must complete both the ICM and University of Manitoba sections.

#### International College of Manitoba (ICM)

Academic English language (University of Manitoba's English Language Program) Complete only if you intend to take English language training prior to starting your ICM program

Year: \_\_\_\_\_ January 🗌 May 🗋 September

Pre-university Level

UTP Stage I

University Level UTP Stage II: Engineering UTP Stage II: Business

UTP Stage II: Arts UTP Stage II: Science

Commencement

Please indicate the year and term you wish to begin your studies.

Year: \_\_\_\_\_ January May September

#### The University of Manitoba

Preferred program (if known):

Preferred major (if known):

## **Request for learning support**

If there is anything that may affect your learning (for example, impairments to your mobility, sight, hearing, reading or writing), please notify ICM and the University of Manitoba so that we can support you. Please indicate your needs on a separate sheet of paper and attach it to this application.

#### **Other information**

How did you first learn about ICM? You may tick more than one.

- Exhibition/seminar
- Newspaper/magazine
- Recommended by a friend/relative
- Recommended by an education agent

□ Internet

Other

Please specify:

# Disclaimer (for students 18 years and under)

I grant ICM permission to provide my parent(s) or guardian(s), when requested, with any information pertaining to my application to study, ongoing academic progress, results and attendance.

□Yes □No

## **Application checklist**

#### Check that you have:

- Completed all sections of the application form
- Read and understood the Conditions of Enrolment including the
- Fee Refund Policy on page 24

#### Check that you have attached:

- Certified copies of your academic qualifications
- Evidence of your English language ability, if required
- A copy of your passport, study permit or birth certificate, if required
- Any relevant employment documentation, if required

# Declaration

- □ I consent to ICM collecting, storing, and using my personal information in the manner and for the purposes set out in ICM's Privacy Policy, which includes admission, registration, graduation and other activities related to ICM's programs, and communication with me regarding my program, courses, campus and student activities and opportunities and the programs and services offered by ICM. I hereby consent to ICM disclosing my personal information to third parties the manner set out in ICM's Privacy Policy, which includes:
  - · disclosure to enrolment agents acting on my behalf
  - disclosure to the University of Manitoba to process my application(s) to transfer from ICM to the University of Manitoba
  - disclosure to the University of Manitoba's Residence and Housing Department in support of my application for student housing at the University of Manitoba
  - disclosure to Navitas Limited and its affiliates for the purpose of communication with regarding programs and services offered by Navitas Limited and/or its affiliates
- □ I acknowledge that if I do not consent to the collection, storage, use and/ or disclosure of my personal information, I may withdraw my consent by written notice to ICM (see the ICM Privacy Policy for contact information), provided that despite such notice, ICM will be permitted to collect, use and disclose personal information in accordance with the applicable legislation.
- □ I authorize the University of Manitoba Residence and Housing Department to give information about my application for student housing to ICM pertaining to my accommodation needs.
  - I authorize ICM to obtain official records from any other educational institution attended I have attended.

- I declare that the information I have supplied on this form is, to the best
  of my understanding and belief, complete and correct. I understand that
  giving of false or incomplete information may lead to the refusal of my
  application or cancellation of enrolment. I have read and understood the
  published course information in the Brochure or the ICM website and I
  have sufficient information about ICM to enrol.
- I understand that fees may increase. I accept liability for payment of all fees as explained in the Brochure or website, and I agree to abide by the Fee Refund Policy and Withdrawal Policy which is current at the time of my studies at ICM and on the Acceptance Offer. I have also read the section in the ICM Brochure or website relating to costs of living and I understand that living expenses in Canada may be higher than in my own country and I confirm that I am able to meet these costs.
- I understand that after I commence my ICM program, I must complete a minimum of 30 courses before I am eligible to transfer for the University of Manitoba.

## **Applicant's signature:**

(Must be the same signature as in your passport)

Date: DAY / MONTH / YEAR

If you are under 18 years of age, your parent or guardian must also sign this application form.

## Parent's/guardian's signature:

Date: DAY / MONTH / YEAR

# Application submission

This application form has been submitted in:

City

Country

Unsigned applications cannot be processed. Agents may not sign on behalf of the applicant.

# Address your application to:

Admissions Officer International College of Manitoba The University of Manitoba Fort Garry Campus 65 Chancellor 's Circle Room 508 University Centre Winnipeg, Manitoba Canada R3T 2N2

#### **Enquiries:** T +1 204 474 8479

- F +1 204 474 8420
- E admissions@icmanitoba.ca
- W icmanitoba.ca

# **Representative details**

Representative's stamp

# A.E.Q. Siddique Managing Partner Student Connection International

Representative name:

Representative office code:

Recruiter's name:

Recruiter's email address: