

PLEASE READ CAREFULLY instructions on page 2.					
STUDENT IDENTIFICATION					
HAVE YOU BEEN PREVIOUSLY AFFILIATED WITH CAPILANO UNIVERSITY? <input type="checkbox"/> YES <input type="checkbox"/> NO			STUDENT NUMBER		
PERSONAL INFORMATION – PART 1					
LEGAL FIRST OR GIVEN NAME(S)		LEGAL MIDDLE NAME(S) (OPTIONAL)		LEGAL LAST OR FAMILY NAME	
PREFERRED FIRST NAME		FORMER LAST OR FAMILY NAME (OPTIONAL)		DATE OF BIRTH (MM/DD/YYYY)	
PRIMARY LANGUAGE <input type="checkbox"/> ENGLISH <input type="checkbox"/> FRENCH <input type="checkbox"/> OTHER:		GENDER <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE		COUNTRY OF CITIZENSHIP	
CONTACT INFORMATION – PART 2					
STREET ADDRESS			CITY		
PROVINCE/STATE		COUNTRY		POSTAL CODE	
EMAIL ADDRESS		PRIMARY PHONE NUMBER		OTHER PHONE (OPTIONAL)	
EMERGENCY CONTACT NAME		EMERGENCY PHONE NUMBER		EMERGENCY EMAIL	
ADDITIONAL INFORMATION – PART 3					
NON-CANADIAN CITIZENS – PLEASE INDICATE YOUR CURRENT STATUS <input type="checkbox"/> PERMANENT RESIDENT – Submit Certified Copy of PR Card <input type="checkbox"/> INTERNATIONAL - Study Permit; Student from other country <input type="checkbox"/> OTHER:					
DO YOU IDENTIFY YOURSELF AS AN ABORIGINAL PERSON OF CANADA? (OPTIONAL) <input type="checkbox"/> YES <input type="checkbox"/> NO			IF YES, PLEASE CHOOSE FROM THE FOLLOWING <input type="checkbox"/> FIRST NATIONS <input type="checkbox"/> MÉTIS <input type="checkbox"/> INUIT		
HAS YOUR EDUCATION BEEN INTERRUPTED FOR MORE THAN 6 MONTHS? <input type="checkbox"/> YES <input type="checkbox"/> NO		PROVIDE A BRIEF OUTLINE OF YOUR ACTIVITIES DURING THIS PERIOD			
ACADEMIC HISTORY – PART 4 List all High Schools (Grades 8-12) and Post-Secondary Institutions you've attended in the past.					
HIGH SCHOOLS – Please list most recent first.					
B.C. PERSONAL EDUCATION NUMBER (PEN)			HIGHEST GRADE COMPLETED <input type="checkbox"/> 8 (or less) <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 or equivalent		
HIGH SCHOOL 1	CITY / PROVINCE / COUNTRY			ENTERED YYYY/MM	LEFT YYYY/MM
HIGH SCHOOL 2	CITY / PROVINCE / COUNTRY			ENTERED YYYY/MM	LEFT YYYY/MM
POST SECONDARY INSTITUTION – Please list most recent first.					
INSTITUTION 1	PROVINCE OR COUNTRY		CREDENTIAL	ENTERED YYYY/MM	LEFT YYYY/MM
INSTITUTION 2	PROVINCE OR COUNTRY		CREDENTIAL	ENTERED YYYY/MM	LEFT YYYY/MM
INSTITUTION 3	PROVINCE OR COUNTRY		CREDENTIAL	ENTERED YYYY/MM	LEFT YYYY/MM
PROGRAM SELECTION – PART 5 Please use program names as listed in the Capilano University calendar or on the University website .					
ARE YOU? <input type="checkbox"/> New Applicant (Domestic) <input type="checkbox"/> New Applicant (International) <input type="checkbox"/> Current Student Changing Program <input type="checkbox"/> Returning Student					
WHICH TERM DO YOU WISH TO START? <input type="checkbox"/> Fall Term (Sept-Dec) <input type="checkbox"/> Spring Term (Jan-Apr) <input type="checkbox"/> Summer Term (May-Aug)				YEAR: 20__	
FIRST PROGRAM CHOICE: _____ CAMPUS: <input type="checkbox"/> North Vancouver <input type="checkbox"/> Sunshine Coast <input type="checkbox"/> Squamish			SECOND PROGRAM CHOICE: _____ CAMPUS: <input type="checkbox"/> North Vancouver <input type="checkbox"/> Sunshine Coast <input type="checkbox"/> Squamish		
ADMISSION STATUS - For detailed requirements for these applicant types, please visit our Admission or Readmission Requirements page. <input type="checkbox"/> Regular Student <input type="checkbox"/> Mature Student <input type="checkbox"/> Visiting Student <input type="checkbox"/> Concurrent High School Applicant				ATTENDANCE <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	
DECLARATION – PART 6					
I hereby declare that all information I have submitted in this application for admission is true and complete and that no information has been withheld to the best of my knowledge. I understand that any omission or misrepresentation of information may result in the cancellation of my admission or registration status. I understand that falsifying documents or information on the application for admission may result in immediate permanent dismissal from Capilano University and I accept that information on falsified documents, including the application for admission, is shared with other post-secondary institutions. I agree that my name may be released to my school or school district for consideration for Capilano University Entrance Scholarships, if applicable. Completion and submission of this application permits Capilano University to request and/or confirm any information necessary to support my application for admission. If I am admitted to Capilano University I agree to familiarize myself with and comply with the most current rules, regulations, and policies of Capilano University during my tenure as a student at the University. I understand that submission of this application in no way guarantees admission to a program or registration into a course.					
STUDENT SIGNATURE			DATE (MM/DD/YYYY)		

INSTRUCTIONS

APPLICATION FOR ADMISSION/READMISSION INSTRUCTIONS

Only completed applications with required documentation will be processed. The first official contact may be by mail. It is, therefore, important to maintain up-to-date information at the University. The University does not accept responsibility for problems caused by incorrect address information. This is an application for admission to Capilano University and DOES NOT constitute or guarantee registration in any particular program or course. The University reserves the right to limit enrolment in any program or course.

HOW TO APPLY 1. Read the online Capilano University Calendar and website

It is important that applicants understand the nature of the program for which they are applying. All applicants must meet the admission requirements. New students are expected to read the online University calendar or website for admission requirements, program information, application procedures and timelines. The University offers information sessions for prospective students, for times and locations of these meetings visit our website or contact the department. Students may also contact the Registrar's Office at 604.984.4900 to sign up for a course planning workshop.

2. Complete the application for admission form

Return the Application for Admission/Readmission form to the Registrar's Office at Capilano University with all necessary documents. The information entered on this form becomes part of your permanent record. Answer all questions fully and accurately; failure to do so may result in your application being returned to you or not being processed. Date of receipt is the business day when the **fully completed** form is received by the Registrar's Office. After being admitted you can apply for transfer credit by completing a "Request for Transfer Credit/Substitution/Exemption/Prior Learning Assessment" form available from the Registrar's Office or online at www.capilanou.ca/current/transfer.

3. Include supporting documentation

Required documents include, where applicable, official transcripts from secondary schools and any institutions of higher education attended, a certified copy of the Permanent Resident card, official TOEFL, ELA, IELTS, CAEL or PTE results. ALL TRANSCRIPTS AND OTHER DOCUMENTS FILED IN SUPPORT OF STUDENT APPLICATIONS BECOME THE PROPERTY OF THE UNIVERSITY AND ARE NOT RETURNED OR PHOTOCOPIED. Original documents which cannot be replaced should not be sent. Certified copies may be accepted. For information, refer to www.capilanou.ca/admissions/Application-Information.

4. Fees

Canadian/Permanent Resident – New Applicants	Include the \$50.00 application fee. Please do not mail cash.
International – New Applicants	Include the \$135.00 application fee. Please do not mail cash.
All Applicants for Readmission	Include the \$50.00 application fee. Please do not mail cash.

5. English language requirement

If English is not your first language, or you have received your education in another language, you are required to submit proof of English competency. See www.capilanou.ca/requirements.

TRANSCRIPT INFORMATION

1. B.C. Secondary School Transcripts

Submit the official transcript for grade 11 and grade 12, G.E.D., or the last grade attempted. Marks for students presently in grade 12 in a B.C. high school will be submitted to Capilano University from the Ministry of Education provided the student has notified Capilano University of their B.C. Personal Education Number (PEN) and followed the instructions on the Ministry of Education website.

2. All other educational institutions' transcripts, including international transcripts

Students need to provide an official transcript which indicates subjects completed and the standing in each and have it mailed directly to the Registrar's Office at Capilano University. Report cards are not considered to be official transcripts. INTERNATIONAL DOCUMENTS MUST BE TRANSLATED INTO ENGLISH BY AN APPROVED TRANSLATION SERVICE.

QUESTIONS?

Please forward any questions about the Application for Admission/Readmission process to admissions@capilanou.ca.

USE OF PERSONAL INFORMATION NOTIFICATION

Personal information on your student record will be used to verify your Personal Education Number (PEN) or to assign one to you. The PEN is a nine digit number assigned to each student as they enter the British Columbia education system. This identification number follows the student through their K-12 and post-secondary education. The PEN is used for multiple purposes including the distribution of funding to schools, transition analysis between schools, districts and post-secondary education, exams and student reporting. The Freedom of Information and Protection of Privacy Act guarantees the privacy of information that is collected, regulates how it is collected and who has access to it. The PEN program follows the guidelines set out by the Freedom of Information and Protection of Privacy Act. If you have any questions about the use of the PEN, please contact the Privacy Assistant in writing at privacy@capilanou.ca.