

Personal information

I consent to FIC collecting, storing, and using my personal information in the manner and for the purposes set out in FIC's Privacy Policy, which includes admission, registration, graduation and other activities related to FIC's programs, and communication with me regarding my program, courses, campus and student activities and opportunities and the programs and services offered by FIC. I hereby consent to FIC disclosing my personal information to third parties in the manner set out in FIC's Privacy Policy, which includes:

- disclosure to enrolment agents acting on my behalf
- disclosure to SFU to process my application(s) to transfer from FIC to SFU
- disclosure to the SFU Residence and Housing Department in support of my application for student housing at SFU
- disclosure to Navitas Limited and its affiliates for the purpose of communication 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 FIC (see the FIC Privacy Policy for contact information), provided that despite such notice, FIC will be permitted to collect, use and disclose personal information in accordance with the applicable legislation.

Request for learning support

FIC provides academic accommodation to students with disabilities (for example, mobility, sight and hearing impairments and reading, writing or other impairments that adversely affect learning, such as attention-deficit hyperactivity disorder). Upon acceptance to the program, we encourage you to advise us of any impairments that may affect your full participation in the FIC curriculum so that we may accommodate your needs.

For more information, please see the Disability Support page of the FIC website (fraseric.ca) or contact us by email at info@fraseric.ca or by telephone on +1 778 782 5011.

Medical insurance requirements

I understand FIC will provide mandatory 4 months of medical coverage upon arrival in Canada. At the end of the 4 months I will have the option to extend the initial coverage or apply for the British Columbia Medical Services Plan.

Other information

How did you first learn about FIC? You may tick more than one:

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

Please specify:

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 28 of the student guide or on the website at fraseric.ca/apply-today/conditions-of-enrolment

Check that you have attached:

- 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 authorize SFU Residence and Housing Department to give information about my application for student housing to FIC pertaining to my accommodation needs.
- I authorize FIC to obtain official records from any other educational institution 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 this brochure or on the FIC website and I have sufficient information about FIC to enrol.
- I understand that fees may increase. I accept liability for payment of all fees as explained in this brochure or on the FIC website, and I agree to abide by the Fee Refund Policy and Withdrawal Policy which is current at the time of my studies at FIC. I have also read the section in this 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.

Applicant's signature:

(must be the same signature as in your passport)

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:

Fraser International College
c/o Simon Fraser University
8999 Nelson Way
Burnaby, British Columbia
Canada V5A 4B5

Enquiries:

T +1 778 782 5011
F +1 778 782 5101
E admissions@fraseric.ca
W fraseric.ca

Representative's stamp

Representative's name:

Representative office code:

Recruiter's name:

Recruiter's email address: