



COLLEGE APPLICATION FORM

This application is submitted by: Self Authorized Representative _____ Student Initials _____

Have you applied with KCC before? No Yes If yes, previous student ID number _____

Personal Information

Legal Last Name

Legal First Name

Preferred First Name, if applicable

Gender

Date of Birth (YYYY/MM/DD)

Country of Citizenship

Home Phone Number

Cell Phone Number

Email Address

Local Mailing Address

City

Province/State

Country

Postal Code

Permanent Address (if different from local address)

City

Province/State

Country

Postal Code

Emergency Contact

Name

Relation

Phone Number

Email

Citizenship Information

- Domestic (Canadian Citizen)
- Domestic (Permanent Resident)
- International
- Other (fill it below)



English Proficiency Score (IELTS, PTE, etc).

Overall Band Scores: Listening: Reading: Writing: Speaking:

Educational History

Secondary Education Information - High School

School Name

Location (City, Country)

Post Secondary Education Information - College or University

College / University Name

Location (City, Country)

Program Information

Primary Choice

Secondary Choice

Preferred Intake

Preferred Campus Location

Application Fee

A non-refundable application fee of \$100 is required with this form

- Visa
- MasterCard
- Wire Transfer

Card Number

Name on Card

Expiry Date (MM/YY)

CVV



Declaration

1. I declare that the information I have submitted with my application, and all supporting documentation, is true and complete.
2. I understand evidence of falsified information or documents will result in permanent cancellation of my application and /or permanent dismissal from the College.
3. Kootenay Columbia College is committed to using personal information in accordance with the Personal Information Protection Act (PIPA). By providing personal information with your application, you give consent for the College to use the information solely for the purposes of providing academic and student support services.
4. I understand that I must declare any difficulty that requires accommodation at the time of admission.
5. I authorize Kootenay Columbia College to verify the information I have submitted with my application, and the authenticity of all supporting documentation.
6. I understand that it is my responsibility to be aware of and to comply with the policy and procedures of Kootenay Columbia College.
7. I understand that the College may share information with other post-secondary institutions in the event that an applicant or student is found to have misrepresented information or falsified documents.
8. I consent to receive promotional emails from Kootenay Columbia College regarding programs or offers that may be of interest to me. I understand that I may unsubscribe at any time via email.
9. Applicants must be willing and able to maintain an excellent attendance rate, not be tardy, and able to follow the rules of the institution and the directions of the staff.

Agency Information, if applicable

Individual or Agency Name

Applicant Signature

Date (YYYY/MM/DD)

Office Use Only

Date Received _____

Received by _____