**APPLICATION FOR INTERNATIONAL STUDENT PROGRAM**

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| **APPLICANT INFORMATION** | | | |
| LAST NAME | FIRST NAME | MIDDLE NAME | DATE OF BIRTH [YEAR/MM/DD] |
| COMPLETE HOME COUNTRY ADDRESS | | | |
| P.O. BOX | APT./UNIT | STREET NO. | STREET NAME |
| CITY/TOWN | PROVINCE/STATE | COUNTRY | POSTAL CODE |
| COMPLETE MAILING ADDRESS (IF DIFFERENT FROM THE ABOVE ADDRESS) | | | |
|  | | | |
| PASSPORT NUMBER | PHONE NUMBER | EMAIL ADDRESS | |

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| **EMERGENCY CONTACT** | | | |
| LAST NAME | FIRST NAME | MIDDLE NAME | RELATIONSHIP TO THE APPLICANT |
| COMPLETE ADDRESS | | | |
| P.O. BOX | APT./UNIT | STREET NO. | STREET NAME |
| CITY/TOWN | PROVINCE/STATE | COUNTRY | POSTAL CODE |
| PASSPORT NUMBER | PHONE NUMBER | EMAIL ADDRESS | |

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| 1. Will there be anyone accompanying you to Canada? | | | □ YES | □ NO |
| 2. Are you currently living in Canada? | | | □ YES | □ NO |
| If yes, what kind of visa do you hold? | | | | |
| 3. Do you have family or friend currently living in Canada? | | | □ YES | □ NO |
| If yes, please specify - | | |  |  |
| LAST NAME | FIRST NAME | MIDDLE NAME | RELATIONSHIP TO THE APPLICANT | |
| ADDRESS | | | PHONE NUMBER | |

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| How did you find out about MTG Healthcare Academy? Please check appropriate box below. | | | | |
| □ MTG Website | □ Social Media | □ Family | □ Friend | □ Other |

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| Please indicate below the program/course you would like to apply. | Please indicate below the desired start date. |
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| Please ensure that you have sent the admission requirements and fees with this application form. | |
| * $150.00 CAD Application Fee [Non-Refundable] | * $500.00 CAD Registration Fee [Non-Refundable but credited to tuition] |

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| **AFFIRMATION** | | |
| By signing this application form, I completely understand the requirements set by MTG Healthcare Academy. I further affirm that all information provided herein are true and correct. | | |
| **APPLICANT’S PRINTED NAME** | **APPLICANT’S SIGNATURE** | DATE SIGNED |

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| Locations of **MTG Healthcare Academy** email address: *info@mtghealthcare.com* | | |
| Calgary Campus  1324 36 Avenue NE  Calgary, Alberta T2E 8S1  Telephone outline403-264-2009 / 403-992-7611 | Red Deer Campus  481 48 Street  Red Deer, Alberta T4N 1S6  Telephone outline403-986-4815 | Edmonton Campus  6920 Roper Road NW  Edmonton, Alberta T6E 0A8  Telephone outline780-434-8328 |