

*For Office Use Only*

Student #: \_\_\_\_\_

Session: \_\_\_\_\_

**Session Requested:**

- AcT Spring 2014 (May 1 - August 15)  
 AcT Fall 2014 (September 2 - December 12)

Please read and fill in this 2 page form electronically and submit with payment. Applications are not considered complete until payment has been received. You are required to complete all details that are highlighted in a red box. Payment methods for your deposit are available at [www.brocku.ca/esl-services/programs/payments](http://www.brocku.ca/esl-services/programs/payments).

For more information about the AcT Program, please visit [www.brocku.ca/esl-services/programs/act](http://www.brocku.ca/esl-services/programs/act)

**Personal Details**

Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

Male:  Female:  Birth Date (Day/Month/Year): \_\_\_/\_\_\_/\_\_\_

Street Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Province/State/Region: \_\_\_\_\_

Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Native Language: \_\_\_\_\_ Nationality: \_\_\_\_\_

Agency Name: \_\_\_\_\_ Referred by: \_\_\_\_\_

**Emergency Contact Information**

Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Academic Information (Current IELP Students Only)**

Student Number: \_\_\_\_\_ Current IELP Level: \_\_\_\_\_

Do you have a conditional acceptance to Brock University? \_\_\_\_\_

If yes, what major have you selected? \_\_\_\_\_

Brock University protects your privacy and your personal information. The personal information requested is collected under the authority of The Brock University Act, 1964, and in accordance with the Freedom of Information and Protection of Privacy Act (FIPPA) for the administration of ESL Services' and the University's programs and services. Direct any questions about this collection to the Director of ESL Services at Brock University at (905) 688-5550, ext. 6008.

## Session Fees and Deposits

Please Note: A \$600 deposit is due at the time of application. The deposit is non-refundable.

Session	Dates	# of Weeks	Tuition	Deposit (Ancillary)	Credit Course Tuition**
Spring 2014	May 1 - August 15	14	\$4000	\$600	Approx. \$3631
Fall 2014	September 2 - December 12	14	\$4000	\$600	Approx. \$3631

\*Fees subject to change

\*\*2013-2014 Fall/Winter fees. 2014-2015 fees to be announced.

## Terms and Conditions

- All fees are in Canadian currency.
- The deposit covers all ancillary fees such as health insurance, bus pass, student identification card, and computer account.
- Medical coverage is mandatory for ALL students. Health insurance is included with your ancillary (deposit) fees. Coverage commences on the first day of term, and lasts for the duration of the term (takes effect for the term you are enrolled in). \*Note: StudentGuard only covers students up to the age of 65. Prospective students 66 years of age and older should contact [eslbrock@brocku.ca](mailto:eslbrock@brocku.ca) about the purchase of alternate health insurance.
- Full payment is due 4 weeks before the start of the program. Effective April 2014, there will be a late payment fee of \$150 for any returning students who do not pay their full tuition by the payment due date.
- All fees are non-refundable with one exception. If your Visa application is denied by the Canadian Embassy, the deposit minus a \$250 administration fee will be refunded with proof of denial. Requests for refunds must be made within one (1) year of the application date.
- Under no circumstances will fees be refunded after the start of a program.
- If you wish to live in Homestay for your session, you must fill out a separate Homestay Application form.

- I have read and fully understand the terms and conditions outlined in this application. I also understand that this information may be shared with other Brock University departments. By checking this box I am indicating that I agree to abide by these terms and conditions.
- By checking this box and adding my name to the "Signature of Applicant" line below, I am adding my electronic signature indicating that I agree to abide by the terms and conditions outlined in this application.

I enclose the payment by:      cheque       copy of bank transfer   
    money order       cash (in person only)

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date of Application

Please save your completed application form (filled in electronically) and send, with proof of payment to [eslbrock@brocku.ca](mailto:eslbrock@brocku.ca)

Brock University  
ESL Services  
500 Glenridge Ave.  
St. Catharines, Ontario L2S 3A1  
Canada

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