

Complete all sections. TYPE or PRINT carefully. An application fee of \$100 (Canadian) must be submitted with this application form by certified cheque or money order only, payable to "Brock University". Applications will not be processed until the application fee is received.

NAME	Title Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/>	Legal Last Name/Family Name	All Legal Given or First Names in Full	
	Preferred Name (eg. English name) ~Optional~		Former Last Name/Family Name	
Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>	Date of Birth (YY/MM/DD)	Marital Status Single <input type="checkbox"/> Married <input type="checkbox"/>	
Status in Canada	Canadian Citizen (includes First Nation) <input type="checkbox"/>		Permanent Resident <input type="checkbox"/>	
	Applying for Study Permit <input type="checkbox"/>		Refugee <input type="checkbox"/>	
Other <input type="checkbox"/> An applicant's status in Canada must be verified through the submittance of appropriate documentation.				
Country of Citizenship			If not born in Canada, date of arrival in Canada (YY/MM)	
First Language				
English Proficiency Test Results				
TOEFL/TWE <input type="checkbox"/> IELTS <input type="checkbox"/> ITELP <input type="checkbox"/> CAEL <input type="checkbox"/> CANTEST <input type="checkbox"/> OTHER <input type="checkbox"/> Please specify: _____				
Home Address	Telephone		Address (Include Apartment Number)	
	City		Province/State	
	Country		Postal or Zip Code (Zip Extension)	
Mailing Address (Optional) if different from home			Address (Include Apartment Number)	
Telephone Ext.				
City		Province/State		
Country		Postal or Zip Code		
Address Expiry Date (YY/MM/DD)				
Additional Communication	<u>Student</u> Email Address		Business Telephone Ext.	
	Fax Number			
Expected Date of Enrolment				
Provide information on all post-secondary institutions you have attended or are currently attending (all Colleges & Universities). Add additional pages if required.				
Academic Background	Postsecondary Type	From Date (YY/MM)	To Date (YY/MM)	Name of Institution
	Undergraduate <input type="checkbox"/>			
	Graduate <input type="checkbox"/>			Location of Institution
	Postgraduate/Professional <input type="checkbox"/>			
Institution URL http://		Field of Study		Degree
Graduation Date (YY/MM) or		Expected Graduate Date		Language of Instruction
Academic Background	Postsecondary Type	From Date (YY/MM)	To Date (YY/MM)	Name of Institution
	Undergraduate <input type="checkbox"/>			
	Graduate <input type="checkbox"/>			Location of Institution
	Postgraduate/Professional <input type="checkbox"/>			
Institution URL http://		Field of Study		Degree
Graduation Date (Year/Month) or		Expected Graduate Date		Language of Instruction
Declaration	I certify that all statements on this application and the material filed in support are correct and complete, including my declaration of citizenship and status in Canada, and all material information has been disclosed. I understand that I may have to provide documentation in the future to substantiate my claim and that any misrepresentation of this information may result in my association with, admission to, or registration in the university being rescinded and cancelled. I acknowledge that Brock University has the right to verify any and all information included as part of this application and to cancel any program due to lack of enrolment.			
	Applicant's signature			Date (YY/MM/DD)
This Application must be signed and dated				



**Graduate Programs Office
Faculty of Business
Brock University**

REQUIRED DOCUMENTATION

Have you ever applied for our Graduate Program before?

Yes, when? _____
(MM/YYYY)

No

Each candidate must provide all of the following documents.

This document checklist is to be completed by the applicant.

<input type="checkbox"/> IMAcc <input type="checkbox"/> MBA (ISP) <input type="checkbox"/> Actg <input type="checkbox"/> Fnce <input type="checkbox"/> Mktg <input type="checkbox"/> PMPCP (Business) <input type="checkbox"/> CAS Agent _____
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Put an 'X' in the box corresponding to the documents you are enclosing. If you do not enclose all the required documents, your entire application will NOT be processed at Brock University. All documents must be in English. If they are not, send a certified translation with a copy of the originals.

--Please submit in order of list below--

DOCUMENT CHECKLIST

- Brock University Graduate Studies Application Form* for admission to the graduate programs
- Official Certificate of Degree(s) **and** translated copy(ies)**
- Official Certificate of Program Completion(s) **and** translated copy(ies)**
- Original school letter(s) of confirmation of enrolment and translated copy(ies)**
- Official University transcript(s) **and** translated copy(ies)**
- Three letters of reference**
- TOEFL score (Brock University Institution Code 0895; Department Code 02), or
- IELTS score, or
- Brock University International Test of English Language Proficiency (ITELP)
- Resume and/or personal statement of interest
- Application Fee of \$100 CDN (paid by certified cheque or money order) must be made payable to Brock University.

***Make sure that the application form is signed. Attach this checklist to required documents and send to Brock University.**

**** These documents should be sent directly from your University or referee to the Faculty of Business Graduate Programs Office at Brock University. If this is not possible, the documents may be submitted by you if they are in sealed envelopes that have been signed by the originating University or referee.**

Brock University protects your privacy and your personal information. The personal information requested on this form 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 the University and its programs and services. Direct any questions about this collection to the Director, of the Graduate Programs Office, Faculty of Business at Brock University at (905)688-5550 ext 4156 or see www.bus.brocku.ca

All **documents** and **application fee** should be submitted **directly** to the following address:

Graduate Programs, Faculty of Business
 Brock University
 500 Glenridge Ave.
 St. Catharines, ONTARIO
 CANADA L2S 3A1