

TORONTO CENTRAL ACADEMY APPLICATION FORM

Personal Data:

Given (First) Name:	
Preferred First Name:	
Family (Last) Name:	
E-Mail Address:	
Date of birth:	
Country of birth:	Canada
Country of citizenship:	Canada
Are you a permanent resident of Canada?:	Yes      No
Gender:	Male      Female
Marital Status:	Single      Married
If you plan to bring family members to Canada while you study, how many?	
Home or Permanent address:	
Street address:	
Town/City:	
Country:	Canada
Zip Code:	
Telephone Number:	

Address of a close friend or relative in Canada (if applicable):

Name:	
Street address:	
City:	
Province:	
Zipcode:	
Telephone Number:	
Application Data:	
Application is for a program with major in:	High School
Write down the exactly program name:	BUSINESS STUDY
Anticipated term of entry:	Fall (September)      Winter (January) Spring (March) Year
Do you have a Canadian Visa?	Yes      No
If yes, what type?	
Expiration date?	

Are you transferring from another Canadian college or university?		Yes	No
If yes, from what school?			
How did you learn about Toronto Secondary Academy			
School:			
English Language Training:			
Language spoken at home is:		English	Other
Years of formal study of English:			
If other, what language?			
Years of formal study of English:			
Years of instruction through English:			
Have you taken Test of English as a Foreign Language (TOEFL)?		Yes	No
If yes Score:			
Date taken:			
Have you taken another Test of English as a Foreign Language (other than TOEFL)?			
Yes		No	
If yes Name:		Score:	
Date taken:			

Previous Education:

Name of School 1:

Location:

Date taken:

Date of Leaving:

Degree(s) received:

Name of School 2:

Location:

Date taken:

Date of Leaving:

Degree(s) received:

Personal Statement: