

Undergraduate Application for Admission

Pers	sonal Details										
1	Name:						_				
			MILY/LAST)	(GIVEN/FIRS		ST)		(MIDDLE NAME)			
2	Other Details:	O Male	O Female	Native Language:		Citizensh	ip:				
3	Canadian ID:	B.C. P.E.N.:				S.I.N.:					
4	Date of Birth:	(Month)	(Day)	(Day) (Year)		Birthplace (City and Country):					
5	Permanent Home A	ddress in Count	ry of Citizenship (Req	y of Citizenship (Required) *Student contact information ONLY* (Post office boxes may not be used)							
Numb	per and Street:										
City:		State/Province	e:		Country:			Postal Code	e:		
Telephone:			Fax:		Email:						
6	Mailing Address fo	r School Docume	nts (if different from home address)								
Numb	per and Street:										
City: State/Province			e:		Country:			Postal Code	 e:		
Telephone:			Fax:	Fax:							
7	Mailing Address fo	r Educational Co	nsultantor Advisor (If Applicable)								
Contact Name:			Number and Street:								
City: State/Province			ce:	Country:			Postal Code	 e:			
Telephone:			Fax:		Email:						
8	Emergency Contac	t	·		•						
Conta	act Name:						Relation to Student:				
Numb	per and Street:										
City: State/Province			ce:	Country:			Postal Code	e:			
Telephone:			Fax:		Email:						
9	Status in Canada:		☐ Canadian Citizen/Permanent Resident☐ Currently Hold Canadian Study Permit			☐ Visitor Visa ☐ Other ☐ Will Apply for Canadian Study Permit					
Edu	cation										
			Select One:	☐ High School Diplo	oma] GED	☐ Other			
1	High School Educa	ation:	School Name:	City/Province or State:			state:				
	*Required		Country:	Graduation Date:(Month)			<u> </u>	(Year)			
			School Name:								
2	Further Education: (College, University) If necessary, attach additional sheet with details of all further education.		City/Province or State:			Country:					
			Dates: fr	to:(Year)							
			Dates: fr				(Month)	(Month) (Year)			
*Required for all education being considered for transfer credits.			Diploma Received:								
			*Are you applying for transfer credits? O Yes O No								
3	FDU Program Start	t Date:	Year: 20	Semester:	□ Fa	all (August)	☐ Spring (Jan	uary) 🗆 Sumn	ner (May)		

Edu	cation (continue)							
4	FDU Program Selection:	 □ Partner English Language program in Vancouver (My IELTS is less th □ Pre-University Program (My IELTS is 5.0 - 5.5 or equivalent) □ Bachelor degree in Information Technology with a concentration in Bu □ Bachelor degree in Business Administration with a concentration in In (choose one): Dual Concentration in □ Information Technology or Minor in □ Marketing □ Bachelor degree in Individualized Studies with a specialization in: □ Business □ Applied Technology □ Hospitality and Tourism Management 			isiness Administration			
5	I have taken or plan to take the following English test:	☐ TOEFL test ☐ IELTS test ☐ Other:	Test date: Test date: Test date:		Score (if finished):			
6	If you currently attend or plan to attend an intensive English language program, please indicate:	Name of the School: Start Date: City:				_		
Ado	litional Information							
1	Would you like to have your application c Are you applying for the Global Scholars *A separate application is required. Please so	Program?*		O Yes O Yes	O No O No			
2	How did you first learn about Fairleigh Dickinson University?	□ Relative/Friend □ FDU Student: □ FDU Staff: □ Canadian Embassy			Agency (Name:			
3	I would like assistance to arrange:	Homestay accommodation in Airport pickup when I arrive: Medical insurance: (all students must have a validation)		O Yes O Yes O Yes	O No O No O No			
4	Release of information: (Required for students using an educational agency)	ise of information: I hereby authorize who is family member friend educational				,		
5	I have included the following documents to support this application (Copy of transcripts MUST be included)	en English test scores (if completed)						
L A I	declare that the information given on the inanswered questions will delay the process with the process with the information of document understand that the information submitted on this egistration and admission, program evaluation and	cessing of my application an ation or information may result in or application will be used to verify or	nd may require its ref cancellation of admission	turn. or registration of	or dismissal from the University.			
	SIGNATURE OF APPLICANT (sam	ne as passport)		DA				
	airleigh Dickinson University is committed to providir ex, disability, age, sexual preference, sexual orientation							

This program is offered under the written consent of the Minister of Regional Economics and Skills Development effective April 1, 2011 for the Business Administration and Information Technology and January 12, 2011 for the Individualized Studies having undergone a quality assessment process and been found to meet the criteria established by the

Information Technology and January 12, 2011 for the Individualized Studies having undergone a quality assessment process and been found to meet the criteria established by the minister. Nevertheless, prospective students are responsible for satisfying themselves that the program and the degree will be appropriate for their needs (for example, acceptable to potential employers, professional licensing bodies, or other educational institutions).

Fairleigh Dickinson University, a private, not-for-profit American university operating in the province of British Columbia, Canada, is committed to protecting the confidentiality of the personal information of its students and employees by ensuring compliance with the *Personal Information Protection Act (PIPA)*. The University collects, uses and maintains personal information from students and employees, at both its Vancouver campus and its U.S. campuses in New Jersey, in a manner that is consistent with *PIPA* guidelines. For further information about the University's privacy policy, please contact the University's privacy officer at **privacyofficer@fdu.edu**.