Highland Academy of Canada 9600 Bathurst Street Vaughan, ON L6A 3Z8

Tel: 905 303 5509

[www.highlandacademy.ca](http://www.highlandacademy.ca/)

 International Student Online Credit Program Application \_

Please kindly submit your application to: Admissions Department, Highland Academy of Canada - Head Office, 9600 Bathurst Street, Vaughan ON L6A 3Z8

*This application is for international students ( students that do not have Permanent Residence or Citizenship in Canada) who are interested in applying to study at Highland Academy of Canada.*

# STUDENT PROFILE

o NEW student o RETURNING student

First name: Middle name: Last name: Country of birth: Citizenship:

Date of birth (MM-DD-YYYY):

Age:

Gender: o Male o Female

Street address: Province: Country:

City: Postal code:

Cell phone: Email:

How did you hear about our school? o Educational Fair o Educational Agent o Friends/Family o Online

# CURRENT SCHOOL PROFILE

*Please attach certified and translated transcripts from your current grade and your last 3 years of study.*

Last school attended: Current grade:

Street address: Province: Country:

City: Postal code:

What grade do you intend on attending at Highland Academy in Canada?: o Grade 9 o Grade 10 o Grade 11 o Grade 12

# FAMILY PROFILE

I live with: o Both Parents o Parent 1 o Parent 2 o Other Parent 1 Full name:

Email: Street address: City: Country: Home phone: ( ) Cell phone: ( )

# CUSTODIAN PROFILE

Correspondence to: o Both Parents o Parent 1 oParent 2 oOther Parent 2 Full name: Email: Street address: City: Country: Home phone: ( ) Cell phone: ( )

*If you are under the age of majority in Ontario ( 18 years) you will require a custodian. A custodian must be a Permanent Resident or Citizen of Canada over the age of 18. He/she must make adequate arrangements for your care and support and reside within a reasonable distance of your residence and school. In the event of an emergency, the custodian will be contacted.*

Please select an option: o Own Custodianship ( Fill section below) o Highland Academy of Canada Custodianship ( $150/Month)

Custodian first name: Email: Canadian street address: City: Province:

Country:

Custodian last name: Home phone: ( ) Cell phone: ( ) Work phone:( )

# STUDENT HEALTH PROFILE

 Do you have a condition that requires special education support? o Yes o No

If YES, please explain:

# AGENT PROFILE

Are you using an educational agent ? o Yes ( Fill section below) o No

Full name of agent: Agency name: Email:

# PROGRAM SELECTION

Please select your start date at Highland Academy of Canada: o February 2022 o July2022 o September 2022

Please select how many Terms you wish to study: o 1 Term o 2 Terms o 3 Terms o 4 Terms

# $300 ANNUAL REGISTRATION FEE PAYMENT ( THIS FEE MUST BE INCLUDED IN THE APPLICATION)

* + Electronic transfer to success@highlandacademy.ca
	+ Cheque/ Money order payable to Highland Academy of Canada
	+ Cash

# TERMS AND CONDITIONS / REFUND AND CANCELLATION POLICY

-The $300 annual registration fee is non-refundable under any circumstance

-There are no refunds unless the student provides an authorized visa rejection letter from Immigration Canada

-If a student is expelled, suspended or otherwise required to leave the school for any reason, all fees paid to Highland Academy are non-refundable

-Items not included in the tuition fees: textbooks, school supplies, field trips, special events, medical insurance, custodianship fees, residence/homestay fees, transporta- tion fees, airport pick up/drop off fees and meals.

I/we hereby certify that the information given on pages 1-2 of this form is true and complete to the best of my/our knowledge. I/we understand the cancella- tion policies and agree not to dispute or attempt to charge back the above signed for and acknowledged charge(s). I am aware it is my responsibility to ensure sufficient funds are available in all accounts specified for payment. I hereby authorize Highland Academy to charge these accounts as per the timelines specified in accordance with my selections.

Signature of Parent 1: Signature of Parent 2:

Date Date