THOMPSON RIVERS UNIVERSITY

Application for Language and Cultural Immersion:

PERSONAL INFORMATION

Family Name:

First Name:

Middle Name: English Name: _____

Mailing Address: _____ ☐ Male ☐ Female Passport Number: _____

_____ Citizenship: _____

City: _____ Birthdate: YEAR / MONTH / DAY

Country: _____ Postal Code: _____ Phone: _____

Email: _____ Fax: _____

Emergency Contact: _____ First Language: _____

Emergency Phone: _____ Other Language: _____

AGENT

AGENT/REFERRAL (if applicable):

Name of Agency: _____ TRU ID# _____

Contact Name: _____ Email: _____

Address: _____ Mobile Phone: _____

City: _____ Phone: _____

Country: _____ Postal Code: _____ Fax: _____

ARRIVAL

ARRIVAL INFORMATION:

Arrival Date: _____ Arrival Time: _____ Airport Pick-Up Requested: Yes ☐ No ☐

Airline and Flight Number: _____ Airport Drop-Off Requested: Yes ☐ No ☐

DATES

☐ **JULY 8 – AUGUST 4, 2010:** Tuition: $2,895.00
Registration deadline: June 8, 2010

☐ **AUGUST 9 – AUGUST 27, 2010:** Tuition: $2,360.00
Registration deadline: July 9, 2010

ACCOMMODATION

HOMESTAY ACCOMMODATION:

Upon receiving your application, TRU will send you a homestay application. You will be required to complete it and return your application one month prior to your program start date. Program costs include your arrival at TRU two days prior to the program start date and departure the day after your program concludes. If you wish to come early or stay later additional fees will be applied.

PAYMENT

TYPE OF PAYMENT:

☐ Bank Transfer – Reference #_____

☐ Credit Card: ☐ Visa ☐ Master Card ☐ American Express

☐ I authorize to charge CDN$_____ to my card — Expiry Date: _____ Month / Year

Credit Card Number: _____

Cardholder name: _____

Signature: _____

Declaration: I understand and agree that: (i) this is an application for a TRU Program only and is subject to the limitation of available resources; (ii) any misrepresentation of information in this application may result in the cancellation of my admission or registration; (iii) information placed in my student record will be used for the purpose of admission, registration, record keeping, including release to the TRU Foundation and TRU Alumni Association or for a use consistent with these purposes; and (iv) if I am admitted to a program, I am subject to the policies and rules of TRU. I certify that all statements on this application are true and complete.

Signature_____

Date_____

Please fax your completed application form to +1-250-828-5140 or email to defrias@tru.ca