

Box 5002, 100 College Drive, North Bay, ON P1B 8L7 Phone: (705) 474-3450, Ext. 4761 Fax: (705) 495-1772 email: admiss@nipissingu.ca website: www.nipissingu.ca

## **APPLICATION FOR PART-TIME ADMISSION**

□BACHELOR OF COMMERCE

### □ BACHELOR OF BUSINESS ADMINISTRATION

Admission to college partnership program is restricted to graduates of 3-year business diploma programs at the partnership locations with a minimum GPA of 3.2 (or equivalent)

	A NO	N-REFUND	ABLE API	PLICATION	FEE C	OF \$65	MUST ACCO	MP	ANY THIS A	PPLI(	CATION	
<ul> <li>□ DISTANCE LEARNING - Please select start term</li> <li>□ SEPTEMBER</li> <li>□ JANUARY</li> <li>□ MAY</li> </ul>				□ COLLEGE PARTNERSHIP – September start only  Select College Partnership Location □ Sheridan- H. McCallion □ Sheridan-Trafalgar □ Fanshawe □ Algonquin □ St. Clair □ Centennial □ Lambton					I	<ul><li>□ Admission</li><li>□ Readmission</li><li>□ Second Degree</li></ul>		
PERSONAL INF	ORMATION	١										
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INIAILING ADDRESS												
CITY				PROVINCE				F	POSTAL CODE			
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STATUS IN CANADA  CANADIAN CITIZEN  PERMANENT RESIDENT  INTERNATIONAL (distance)			COUNTRY	OF CITIZENSH	ΗP		DATE OF ARRIVAL IN CANADA MONTH YEAR		[	FIRST LANGUAGE  ENGLISH FRENCH OTHER		
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EMPLOYMENT OR ACTIVITIES WHEN NOT A FULL-TIME STUDENT					T							
FROM TO EMPLOYER OR NATURE OF ACTIVIT			ACTIVITY	TIVITY JOB TITL			LE / DESCRIPTION					
IF YOU HAVE PREVIOUSLY ENROLLED AT NIPISSING UNIVERSITY, PLEASE COMPLETE THIS SECTION												
HAVE YOU TAKEN ANY COURSES AT A POST-SECONDARY INSTITUTIO☐ YES - WHAT INSTITUTION(S)☐ NO					TION SI	DOC				DOCUN	UMENTS TACHED □ TO FOLLOW	
NIPISSING STUDENT NUMBER:					LAST PROGRAM: LAS				LAST	AST SESSION:		

It is your responsibility to ensure that your application and all supporting documentation is truthful, complete and correct. Nipissing University reserves the right to verify any information provided as part of this application. If any information in your application is determined to be false or misleading, concealed or withheld, your application may be invalidated and this could result in its immediate rejection or in the revocation of an offer of admission or registration at the university. Information about a rejection or revocation of your application may be shared with universities and colleges across Canada. The determination of whether an application contains false or misleading information or that you have concealed or withheld information, and with which universities and colleges this information may be shared, is solely at the discretion of the university.

I hereby certify that all personal information and documents submitted are true, correct and complete including my declaration of citizenship and status in Canada

IPPLICANT'S SIGNATURE	DATE	Rev 04/14
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#### INSTRUCTIONS FOR COMPLETION - PLEASE READ CAREFULLY

This form is for applicants to the part-time Bachelor of Commerce program or the part-time Bachelor of Business Administration program. Part-time students may take up to two courses per semester. Students who wish to take more than two courses per semester must apply for full-time admission through the Ontario Universities Application Centre – www.ouac.on.ca.

Please print clearly when completing this form. Complete ALL sections of the application form. Illegible or incomplete forms may be returned. There is a \$65.00 non-refundable application processing fee due at time of application. Forms received without payment will not be processed.

## **REQUIRED DOCUMENTS**

Please note that transcripts and supporting documents become the property of Nipissing University and cannot be returned.

### 1) Official Transcripts:

Academic transcripts must be original, either sent directly by the issuing institution or, if submitted with the application, in the original, sealed envelope. Photocopies, faxes and scanned documents will not be accepted. **You must submit all college and university transcripts whether or not you consider them relevant to your application.** If any information in your application is determined to be false or misleading, concealed or withheld, your application may be invalidated and this could result in its immediate rejection or in the revocation of an offer of admission or registration at the university. Applicants who attended foreign universities must have their transcripts assessed by the World Education Service – www.wes.org.

## 2) Proof of Legal Name Change:

A proof of legal name change is required if academic documents show a name other than that under which application is made. Some examples of proof of legal name change would be marriage certificate or divorce decree.

#### 3) English translations:

If the transcripts you are submitting are not in English, you will be required to provide a certified English translation together with copies of the original transcripts.

## 4) Proof of Proficiency in English:

Applicants whose first language is not English may be required to supply proof of proficiency in English. Please contact the Admissions Office for additional information about English language proficiency requirements.

### **DEADLINES**

To start May 2014 - April 18, 2014

To start September, 2014 - August 22, 2014

To start January 2015 – December 5, 2014

## **CONTACT INFORMATION**

Direct all inquiries and documents to: Nipissing University, Office of the Registrar PO Box 5002, 100 College Drive North Bay ON P1B 8L7

Phone: 705-474-3450, ext. 4761, Fax: 705-495-1772

email: admissions@nipissingu.ca

## Admission decisions are mailed to applicants once all documents have been received.

#### **Protection of Privacy**



# METHOD OF PAYMENT FORM Distance Learning

**Bachelor of Commerce Bachelor of Business Administration** 

Office Use Only

NAME OF APPLICANT:					
□ \$65 APPLICATION PAYMENT BY CHEQUE, BANK DRAFT OR MO Make payable to "Nipissing University".	NEY ORDER				
□ \$65 APPLICATION PAYMENT BY CREDIT CARD  VISA □ MASTERCARD □  Credit card payments that cannot be processed for any reason (for invalid number, expired card, etc.) will be subject to a processing					
NAME ON CARD:					
Card Number	Expiry (mm/yy)				
CARDHOLDERS'S SIGNATURE:  DATE:					
If you have indicated that your application fee is to be paid by credit card, written authorization for the payment transaction. Verbal authorization wi of the required credit card information. The expiry date is necessary to complete	ill not be accepted. Please provide all				
Our mailing address is: Nipissing University, Office of the Registrar 100 College Drive, P.O. Box 5002 North Bay ON P1B 8L7	Office Use Only  Payment \$  Date Paid				
Registrar's Office Fax (705) 495-1772	CK Item #				