

Application for Graduate Study York University

Please type or print clearly and complete all fields questions on all pages of this application.

/ 1	. ,				
1) Name &	DENTITY				
Title Mr.	Ms. Other (specify)	Date of Birth (YYYY/MM/DD)			
Legal First Name		Common Name			
Legal Middle Nar	me	Email Address			
Legal Surname (F	Family Name)	Gender (choose the option that you identify with most)			
Former Surname	(if applicable)	Male	Fema	ile	Other
Have you previou	usly applied to York? Yes No If yes, w	hen? (YYYY)	Previous York stud	lent number	
2) Address	& Contact Information	3) CITIZE	NSHIP & LANGUA	GE	
Street Address		Language of	f Correspondence	English	French
		Country of Citizenship			
City	Province/State	First Language			
Country	Postal/ZIP Code	What is you	r official status in Can	ada? (choose o	only one)
		Canadian	Citizen		
Phone Numbers	(include area codes)	Permanent Resident of Canada (Landed Immigrant)			
Home		Currently on, or will require, study permit to study in Canada			
Mobile		Diplomati	C		
Business ext		Conventio	n Refugee (Protected F	Person)	
		Visitor			
		No Status			
		Date of Arriv	val in Canada		
4) GOAL OF	STUDY				
	sh to begin classes? (choose one)				
May/	/June/July 2021 (Spring/Summer)	September 2021 (Fall)			
Do you wish to study part-time or full-time? (choose one)		Pai	rt-time		Full-time

Programs can be browsed at **futurestudents.yorku.ca/graduate/programs**

Purpose of Study (choose only one)

I wish to study toward a degree.

Program Choice

I wish to study toward a graduate diploma.

Diploma Choice

I wish to enrol as a visiting student.

Faculty Choice

5) Previous Education

Ontario Education Number (OEN)

The OEN is a student identification number that will be assigned by the Ministry of Education to elementary and secondary students across the province. The OEN can be found on your Ontario Secondary School Transcript (OST).

Postsecondary Institution(s) Attended

List all in-progress and completed postsecondary studies. Start with most recent and include York University, if applicable.

Name of School #1			Name of School #4			
City			City			
Province/State	Country		Province/State	Country		
Degree/Diploma/Certificate/Credential			Degree/Diploma/Certificate/Credential			
Program/Major			Program/Major			
From (YYYY/MM)	to (YYYY/M/	И)	From (YYYY/MM)	to (YYYY/MM)	
Did you graduate?	Yes	No	Did you graduate?	Yes	No	
Name of School #2			Name of School #5			
City			City			
Province/State	Country		Province/State	Country		
Degree/Diploma/Certific	ate/Credential		Degree/Diploma/Certific	cate/Credential		
Program/Major			 Program/Major			
From (YYYY/MM)	to (YYYY/M/	И)	From (YYYY/MM)	to (YYYY/MM)	
Did you graduate?	Yes	No	Did you graduate?	Yes	No	
Name of School #3			Name of School #6			
City			City			
Province/State	Country		Province/State	Country		
Degree/Diploma/Certificate/Credential			Degree/Diploma/Certificate/Credential			
Program/Major			 Program/Major			
From (YYYY/MM)	to (YYYY/M/	M)	From (YYYY/MM)	to (YYYY/MM)	
Did you graduate?	Yes	No	Did you graduate?	Yes	No	

To complete this application, you must read and sign the next page.

This application **will not** be accepted without a signature.

6) Declaration & Consent

I have read and agree to the following:

- I certify that the information I have provided in this application is true, complete and accurate in all respects, including my declarations as to citizenship and immigration status in Canada, institutions attended and that all available information requested in this application has been disclosed.
- All information I have provided in connection with this application is subject to verification and audit by York University.
- 3. I shall provide supporting documentation to York University to verify my eligibility upon request.
- 4. I consent to the disclosure by York University of personal information I have given in this application to referees I have named and to other educational institutions when necessary to verify my statements.

Name of person who may enquire on my behalf

Relationship to me

5. I understand that any misrepresentation on this application or failure to provide my consent to authorize York University to verify my information on this application may result in cancellation of my admission or enrolment status.

Applicant's signature

Date (YYYY/MM/DD)

7) Payment Information

AUTH # (for York internal use only)

Note: Payment by Visa Debit, Paypal or Western Union is not accepted.

Credit Card Type	Visa	Mastercard				
Applicant's name						
Cardholder's name						
Card Number						
Expiry Date (MM/YY)						
Cardholder's signature						

SUBMISSION INSTRUCTIONS

Submit this completed application to:

York University
Office of Admissions (Graduate)
Bennett Centre for Student Services
99 Ian Macdonald BLVD
Toronto, Ontario M3J 1P3
Canada

Once you have submitted your application, you will receive an email containing your York reference number.

You can then track the progress of your application and submit required supporting documents at **yorku.ca/myfile**.

All required documentation, including transcripts, is due within 14 days of the application deadline.

For details on required documents, visit: **futurestudents.yorku.ca/graduate**.

Protection of Privacy

York University gathers and maintains information for the purposes of admission, registration and other fundamental activities related to being a member of the University community and to attending a public postsecondary institution in the Province of Ontario. When signing an application for admission, you should know that the information you provide, and any other information placed into your student record, will be protected and used in compliance with Ontario's Freedom of Information and Protection of Privacy Act. The information on this form is collected under the authority of The York University Act, 1965 and is needed for educational, administrative and statistical purposes and to process your application for admission. The information will be used to verify qualifications and decide your eligibility for admission. Upon admission and registration, this information will form part of your student record and will be used to document your progress in an academic program.

If you have any questions about the collection, use and disclosure of your personal information by York University, please contact the Manager, Information Services, Bennett Centre for Student Services, York University, 99 Ian Macdonald BLVD, Toronto, Ontario, Canada M3J 1P3, 416-736-5000. yorku.ca/ipo

Disposal of records

All documents must be originals. Replaceable documents become the property of York University and will not be returned. We keep supporting documents for one year, after which we destroy materials related to your application. If the request is made upon application, irreplaceable documents will be returned to the original document holder.