



SECONDARY STUDENT REGISTRATION FORM 21-22

Your Application Guidelines

Please read the guide carefully to avoid delays in the application process.

Personal Information

Please let us know immediately if your contact information has been changed, including mailing addresses, telephone numbers and e-mail address.

Admission Requirements

Please check carefully whether you have met the entry requirements for your chosen program. All requirements are listed on our website.

Education Background Information

Please state all your secondary educational background. We require **original** transcripts and diploma from any attended secondary (Grade 9 to 12) school. If your documents are not in English, please include a translation with the original copy.

Minimum IT Requirements

- A PC with Windows 7 or higher, or, a Macintosh running OS X 10.6 or higher
- 2GHz or higher, 2GB RAM or more
- A high-speed Internet connection
- A camera, microphone, speakers or a headset

English Language Proficiency Requirements

If you are a non-native English speaker, you are required to submit evidence of your English proficiency. This can be done by an independently verified English language test such as Duolingo, IELTS, TOFEL.

Please submit complete application form to

Concordia Ontario Academy
Admissions Office
1165 Centre Street, Pelham
Niagara Region, Ontario, Canada L0S1C0

Email: admissions@concordia-academy.com

FOR SCHOOL OFFICER USE ONLY

Application No.		
Decision	Interview	
	Reject	
	Offer	
Signed (Admissions)		

Personal Information *

Title:	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss	<input type="checkbox"/> Ms	<input type="checkbox"/> Dr	<input type="checkbox"/> Other
First Name(s):	<input type="text"/>					
Last Name:	<input type="text"/>					
Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female				
Nationality:	<input type="text"/>					
Email Address:	<input type="text"/>					
Alternative Email:	<input type="text"/>					
Date of Birth:	<input type="text" value="yyyy/mm/dd"/>					
Telephone	Home:	<input type="text"/>				
	Cell:	<input type="text"/>				
Permanent Address	Street:	<input type="text"/>				
	City:	<input type="text"/>				
	Postal Code:	<input type="text"/>				
	Country:	<input type="text"/>				
		*Permanent Address must match Nationality				
Current Mailing Address Same as Permanent Address?		<input type="checkbox"/>	*If checked, you can skip filling in Current Mailing Address Section			
Current Mailing Address	Street:	<input type="text"/>				
	City:	<input type="text"/>				
	Post Code:	<input type="text"/>				
	Country:	<input type="text"/>				

Parent/Gurdian Information *

*Please provide details of a contact person in case of emergency

Title:	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss	<input type="checkbox"/> Ms	<input type="checkbox"/> Dr	<input type="checkbox"/> Other
First Name:	<input type="text"/>					
Last Name:	<input type="text"/>					
Relationship to the Applicant	<input type="text"/>					
Telephone	<input type="text"/>					
Email:	<input type="text"/>					
Emergency Contact?	<input type="checkbox"/>					
Title:	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss	<input type="checkbox"/> Ms	<input type="checkbox"/> Dr	<input type="checkbox"/> Other
First Name:	<input type="text"/>					
Last Name:	<input type="text"/>					
Relationship to the Applicant	<input type="text"/>					
Telephone	<input type="text"/>					
Email:	<input type="text"/>					
Emergency Contact?	<input type="checkbox"/>					

Program Details *

* Certain programs only available as in-person mode

Program Type	<input type="checkbox"/> OSSD Program	<input type="checkbox"/> Canada Prestigious Program	<input type="checkbox"/> UK Prestigious Program	<input type="checkbox"/> US Prestigious Program	
	<input type="checkbox"/> Concordia Foundation Course	<input type="checkbox"/> Berklee Music Program			
Study Mode	<input type="checkbox"/> Virtual (Online)	<input type="checkbox"/> In-person			
Starting Term	<input type="checkbox"/> Semester I (Sep)	<input type="checkbox"/> Semester II (Nov)	<input type="checkbox"/> Semester III (Jan)	<input type="checkbox"/> Semester IV (Mar)	<input type="checkbox"/> Semester IV (Jul)

English Language Test Score *

* For non-native English speakers

IELTS	<input type="text"/>	TOEFL	<input type="text"/>	Duolingo	<input type="text"/>	Other (Specify Name & Score)	<input type="text"/>
Listening:	<input type="text"/>	Speaking:	<input type="text"/>	Reading:	<input type="text"/>	Writing:	<input type="text"/>

Education Background *

* Please attach the latest transcript with detailed information

1: School Name	<input type="text"/>				
Start Date:	<input type="text" value="yyyy/mm"/>	End Date:	<input type="text" value="yyyy/mm"/>	Grade	<input type="text"/>
2: School Name	<input type="text"/>				
Start Date:	<input type="text" value="yyyy/mm"/>	End Date:	<input type="text" value="yyyy/mm"/>	Grade	<input type="text"/>
3: School Name	<input type="text"/>				
Start Date:	<input type="text" value="yyyy/mm"/>	End Date:	<input type="text" value="yyyy/mm"/>	Grade	<input type="text"/>

Applicant & Parent Consent and Signature *

Consent to Contact: Concordia Ontario Academy (COA) will use your contact information to send you school-related communications. You may withdraw your consent at any time by contact COA at info@concordia-academy.com.

I authorize the COA to use my contact information to communicate with me.

I certify that the above information is true and complete. I understand that any false or incomplete information submitted may invalidate my application.

I have read the Freedom of Information and Protection of Privacy Statement. I authorize COA to interact/exchange my information with my agent regarding my admission, school performance, legal status and health status.

Date:

Applicant
Signature:

Date:

Guardian
Signature: