



3100 Foul Bay Road, Victoria BC, V8P 5J2 Canada

Camosun College Student Exchange Program Winter 2012 & Fall 2012

Application for Camosun College Students

Application Deadline: Oct. 15, 2011 for Winter 2012, Mar. 31, 2012 for Fall 2012

Our staff is committed to helping you. If you have problems completing your application, contact us at studyabroad@camosun.bc.ca or by phone at 250-370-3682.

Only completed applications will be accepted. Good luck with your application!

A complete application includes a copy of:

- Two confidential References
- Biographical Information with two photos (passport sized, signed)
- One Proposed Study Plan
- Most recent academic transcript/record of academic grades showing courses in progress
- Budget Worksheet
- Resume (one page)

Please include:

- Work and volunteer experience
- Hobbies and interests
- Countries lived in 6+ months, with dates
- Experience working/living abroad or in another culture

- Statement of Purpose (one page)

Please include:

- How the exchange would contribute to your academic program, future career, community work and life experiences;
- How you would share your exchange experience the Camosun College community and others when you return;
- How courses taken at the partner universities you have chosen would contribute toward the completion of your program at Camosun College.

Freedom of information and protection of privacy

The information in this form is collected under the authority of the University Act (R.S.B.C. 1979, c. 419), and is needed to process your application. This information will be used to verify qualifications and decide your eligibility for acceptance into the program. If you have any questions about the collection and use of this information contact the Associate Director of Camosun College International, 250-370-3649.

Please return this completed form, together with all required documents, to:

Camosun College International
3100 Foul Bay Road
Victoria, BC V8P 5J2

Tel: 250-370-3681 Fax: 250-370-3689

E-mail: studyabroad@camosun.bc.ca

Application for Admission as an Exchange Student

Please TYPE or PRINT clearly

A. PERSONAL DETAILS	
Surname Name: _____	First Name: _____
Preferred name _____	
Previous Surname (if applicable): _____	Student Number: _____
Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms Other (specify) _____	Date of birth (yyyy/mm/dd) _____
Country of citizenship: _____	Primary language: _____
PERMANENT MAILING ADDRESS	
Street/number _____	
City _____	Province _____ Postal code _____
Telephone* Day _____	Evening _____ E-mail _____
EMERGENCY CONTACT	
Name: _____	Relationship to you: _____
Street/number _____	
City _____	Province _____ Postal code _____
Telephone* Day _____	Evening _____ E-mail _____
*Please include the country code and area/city code with telephone numbers.	

B. DISABILITY INFORMATION (OPTIONAL)
If you require special assistance due to a disability, please provide the following information. This information will be kept confidential and it will not affect your acceptance to the exchange program.
Type of disability: <input type="checkbox"/> Vision <input type="checkbox"/> Hearing <input type="checkbox"/> Learning <input type="checkbox"/> Reading <input type="checkbox"/> Mobility <input type="checkbox"/> Other
<i>Please attaché a brief statement outlining your needs at the partner institution.</i>

C. ACADEMIC INFORMATION

Faculty/area of study at Camosun College: _____

Year of study currently completing: 1st 2nd 3rd

Desired field of study at partner institution: _____

Number of semesters you plan to study at partner institution: one two

Note: exchange students can attend partner institution for a maximum of two semesters.

In which semester do you plan to begin your study abroad? Fall Winter

D. PARTNER INSTITUTION OPTIONS AND EXCHANGE PERIOD OF STUDY

List three options in order of preference. Only applications with three partner institutions will be accepted.

Indicate the Camosun College term(s) that you plan to be away on exchange. **Please be aware that partner institutions' terms do not always correspond exactly with Camosun College terms.**

Partner Institution Options:	Camosun College Term Jan 12 – April 12	Camosun College Term Sept 12 – Dec 12
1 st _____	<input type="checkbox"/>	<input type="checkbox"/>
2 nd _____	<input type="checkbox"/>	<input type="checkbox"/>
3 rd _____	<input type="checkbox"/>	<input type="checkbox"/>

E. LANGUAGE PROFICIENCY

Are you planning to take classes taught in a language other than English? Yes No

If yes, which language(s): _____

Which languages do you speak/write other than English?

Language	Spoken			Written		
	Beginner	Intermediate	Advanced	Beginner	Intermediate	Advanced
1.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

We will contact you if a language proficiency interview is required.

Signature _____

Date _____

Approval of the Exchange Advisor at Camosun College

Name (print) _____

Title _____

Signature _____

Date _____

Camosun College Student Exchange - Budget Worksheet

- We require a completed budget in order to consider your application. However, financial information will not be used in determining your suitability for exchange.
- Information on this form will not be evaluated for correctness. You are responsible to ensure that you have adequate funds for your exchange.
- Keep in mind that currency exchange rates may fluctuate significantly. Plan emergency funding to help deal with unexpected costs.
- List all amounts in Canadian dollars.

Last Name: _____ First Name: _____ Student Number: _____

ESTIMATED RESOURCES	ESTIMATED COSTS	OPTION 1	OPTION 2
Savings	Partner Institution		
Personal Loans	Current Exchange Rate		
Financial Gifts	Camosun College Tuition and Related Fees		
Student Loans	Transportation to exchange destination (airfare, etc.)		
Bursaries/Grants	Accommodation and meals		
Scholarships	Books and Supplies		
Part-time work while on exchange (not always possible to work; check with consulate)	Health Insurance		
Other:	Local Transportation		
	Personal Spending		
	Recreational Travel		
	Emergency Funds		
	Other:		
TOTAL RESOURCES	TOTAL COSTS		

References for Applications

- 2 references required (same form)
- Both must be completed by faculty who have known you for a minimum of one semester
- One reference must be completed by a current instructor (you are currently a student in their course)
- References must be brought back to the International office by the referee (or mailed back directly)



**Camosun College International
External Studies Reference Form**

The student named herein is applying for a formal international Exchange. We would appreciate your comments on the student's suitability for such a program. Students participating in an International Exchange represent Camosun College and act as ambassadors of our College and our country.

To be completed by applicant:

Surname _____

Given names _____

CC student number _____

To be completed by referee:

For how long and in what capacity have you known the applicant?

Comment on the relevance of the proposed overseas Exchange Program to the applicant's academic career.

Indicate (with a check mark) the applicant's ability and academic competence in comparison with other individuals you have known at similar stages of their academic careers and with others who may have previously applied for, or participated in, a similar program, bearing in mind performance in your class.

	Outstanding	Excellent	Good	Average	Poor	Unable to judge
Academic/intellectual potential						
Motivation and seriousness of purpose						
Maturity						
Emotional stability						
Ability to adapt to new circumstances						
Ability to work with others						
OVERALL RATING OF CANDIDATE						

Comment on any areas in which the applicant might be relatively weak.

Comment on the applicant's adaptability to new situations and a potentially new culture.

CAMOSUN COLLEGE International

External Studies Reference Form for _____ (please insert Applicant's name)

Comment on the ratings you have made on the reverse and make additional comments regarding the applicant's suitability for a formal Exchange Program.

Do you recommend the applicant for the Exchange Program?

Highly recommend Recommend Recommend with reservations Do not recommend

REFEREE INFORMATION

Name _____

Position _____

Mailing address _____

Email address _____

Contact telephone _____

Signature _____ Date _____

If you have any questions about the study abroad program for which this student is applying, this reference form or letter of reference, or if you would like more information about the Exchange Programs offered at Camosun College, please contact CAMOSUN COLLEGE International at 250.370.3681 or via email studyabroad@camosun.bc.ca

Kindly return this reference DIRECTLY to: CAMOSUN COLLEGE International
Exchange Programs
Camosun College
3100 Foul Bay Road
Victoria, British Columbia
CANADA V8P 5J2