

U.S. Student Application for Admission

Victoria Motion Picture School will be identified throughout this document by the initials "VMPS". Incomplete information may cause unnecessary delays in your acceptance. All information is confidential.

PLEASE PRINT ALL INFORMATION

| | |
|--|-----------------------|
| circle one | |
| Full Name | Mr. Mrs. Miss Ms. |
| Preferred First Name | Birth Date (mm/dd/yy) |
| Citizenship | Passport # |
| Permanent Address | |
| Mailing Address (if different from above) | |
| | Postal/Zip Code |
| Telephone # | Facsimile # |
| Email Address | |
| Next of Kin (In case of emergency): | Relationship |
| Telephone # | Alternate Telephone # |
| Name of the program you are applying for and start date (mm/yy): | |

NOTE: All US students applying for a Canadian Student Visa must provide proof of their financial support during their term of studies. It must be enough to pay tuition in full prior to the beginning of the program and enough to live on for the duration of the program.

VMPS does NOT provide financial aid.

Tuition is due in full at least 30 days prior to the program start date.

NOTE: All US students are required to enroll in the BC Medical Insurance Program OR obtain International Health coverage from the United States prior to arriving in Canada. There is a three-month waiting period to enroll in the BC Medical Insurance Program, during which students should ensure they have the International Health coverage.

ADMISSION GUIDELINES

Applications are processed on a first-come, first-served basis and applicants are encouraged to apply at least one month prior to the Program start date. The maximum number of students who can be accommodated in each program of study is limited. The presentation of minimum requirements does not guarantee an individual applicant will be granted admission to the school, or to their program of choice. Victoria Motion Picture School reserves the right to refuse admission to any student. Due to the nature of jobs in the film industry students applying for full-time certificate courses must be able to demonstrate full mobility.



Note:
A \$100 CAD non-refundable application fee must accompany this submission.



The Victoria Motion Picture School is an accredited Institution pursuant to the rules and regulations of the Private Career Training Institutions Agency of British Columbia

Please mail or drop off your application to:

Victoria Motion Picture School
Office of the Registrar
751 Discovery St
Victoria, BC V8T 1H1
Canada

Tel: (250) 381-3032
Toll Free: 1-888-522-3456
Fax: (250) 388-7349
Email: vmps@vicfilm.com

APPLICATION REQUIREMENTS

All requirements must be received by VMPS before an application is adjudicated.

Payment: bank transfer, a certified cheque, Credit Card or international money order.

All correspondence must be completed in English.

All funds are to be paid in Canadian dollars (CAD).

- A completed Application Form
- Application Fee of \$100.00
- All US Students must provide Proof of Citizenship
- Official Scholastic Transcripts- from the last academic institution you attended.(Please have them sent directly to VMPS)
- Two letters of reference from individuals who have known the applicant for 3 or more years and are NOT related(Please have them sent directly to VMPS)
- A statement of personal interest explaining in detail, in your own words, your reasons for applying to VMPS, any past skills you feel are related and your future goals and ambitions once you've completed the program.
- Current resume
- An interview will be arranged after all of the above has been received.

REFUND POLICY FOR US STUDENTS

A. Student Authorization/ Student Visa Related Withdrawals

- 1) VMPS will retain the lesser of 25% of the total fees due under the contract or \$400 to to US students who:
 - (a) are denied authorization from Canadian Citizenship and Immigration
 - (b) do not receive authorization prior to the start of the program study, provided that
 - i) the student notifies VMPS of the circumstances in subsection 1 (a) or (b) on or before the first day of a program of study is scheduled to begin.

NOTE: No funds will be released until official documented proof issued by Canadian Citizenship and Immigration has been provided to VMPS.

B. Non-Student Authorization Related Withdrawals

- 2) (a) If written notice of withdrawal is received by VMPS less than seven (7) calendar days after the contract is made and before the program starts,.

VMPS will retain the the lesser of 25% of the total fees due under the contract or \$400.
- (b) Subject to subsection 2(a) if written notice is received by VMPS between 7 and 30 calendar days before the start of the program of study, VMPS will refund 60% of the tuition fees paid.

VMPS will retain 40% of the total fees paid.
- (c) Subject to subsection 2(a), if written notice of withdrawal is received by VMPS more than 30 calendar days before the start of the program of study, VMPS will refund 75% of the total fees paid.

VMPS will retain 25% of the total fees paid.

C. Refunds After the Program of Study Starts

- 3 (a) If written notice of withdrawal is received by VMPS, or a student is dismissed within 10% of the duration of the program of study, the institution will retain 50% of the total fees under the contract.
- (b) If written notice of withdrawal is received by VMPS, or a student is dismissed within 11% and 30% of the duration of the program of study, the institution will retain 70% of the total fees under the contract.
- (c) If a student withdraws or is dismissed after 30% of the program of study, there is no refund.

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AGREEMENT OF RESPONSIBILITY

If this application is accepted, I agree to abide by the rules and policies of VMPS, to be regular in attendance, to pay all fees and to carry out the instruction of the management and instructors while on the school premises. I understand that VMPS will be operated in conformity with the regulations of the Private Career Training Institutions Agency of British Columbia and that any refund of fees will be according to the guidelines outlined above.

I hereby declare that the information I have submitted for application for admission is true and correct to the best of my knowledge. This signed application permits VMPS to confirm and request any information to support my application for admission. False statements and documents result in permanent and immediate cancellation of registration and admission to VMPS.

I, _____ acknowledge by signing below that I have read and understand the entire content of the aforementioned agreement.

Signature of Applicant

Signature of Witness

Date Signed by Applicant and Witness

Signature of VMPS Registrar

Date Received and Signed by VMPS Registrar

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