2024–2025 | TRU ADMISSIONS APPLICATION FORM



805 TRU Way Kamloops, BC, Canada V2C 0C8 admissions@tru.ca 250-828-5036

PERSONAL INFORMATION First or given name(s) (legal): Middle name(s) (optional): Last or family name (legal): ___Preferred name(s): _____ Former last or family name (optional)_ Include any name prior to a legal name change **DESCRIPTIONS** Birthdate (yyyy/mm/dd): _____/___/ Woman: People whose current gender is woman. Cisgender: This includes cisgender and transgender people People whose sex assigned at birth Please indicate your identifying gender: who are women. is the same as their gender. (ie. Identify as a woman, and born a girl) ☐ Woman ☐ Non-Binary Man: People whose current gender is man. This includes cisgender and transgender people Transgender: ☐ Prefer not to answer ☐ Man who are men. People whose sex assigned at birth is different from their gender. (ie. Non-Binary: People whose current gender is not Would you say you are: Identify as a man, and born a girl) exclusively a woman or man. This includes people who do not have one gender, have no gender, are ☐ Cisgender ☐ Prefer not to answer gender fluid, or are Two-Spirit. ☐ Transgender Primary language spoken at home:____ Country of citizenship: ___ If citizenship is Non-Canadian, please indicate Visa Status: ■ Permanent Resident Refugee (status granted) ■ Student Authorization/Student Visa **CONTACT INFORMATION** Mailing Address: Admission correspondence may be sent to your mailing address Street address: _____ City: _____ Province: _____ Postal Code: _____ Country: _____ Email: ____ Phone: Primary: ______Other: _____Other: Emergency contact (full name): _____ Emergency contact email: _____ Emergency contact primary phone: Other: ADDITIONAL INFORMATION If you are a current / former TRU student, or have been employed by TRU, you will have been assigned a TRU ID number. Please note it here. TRU ID Indigenous Self-Identification ☐ Please check this box if you wish to be identified as an Indigenous person If you have chosen to identify yourself as an Indigenous person, for statistical purposes, we invite you to select the option(s) that best describes your Indigenous identity. First Nation (including Status, non-Status, Treaty and non-Treaty) ■ Métis ☐ Inuit

| PROGRAM SELECTION | |
|---|-------|
| When do you want to start your program: If you are applying for an online and distance program through Open Learning (OL) please select Open Learning only. | |
| ☐ Open Learning only | |
| ☐ Winter 2024 (Jan-Apr) | |
| ☐ Summer 2024 (May-Aug) | |
| ☐ Fall 2024 (Sep-Dec) | |
| ☐ Winter 2025 (Jan-Apr) | |
| Select your program level | |
| ☐ Bachelor Degree ☐ Diploma ☐ Certificate ☐ Graduate Degree ☐ Graduate Diploma/Certificate | |
| ☐ Trades Foundation ☐ Upgrading ☐ Unclassified | |
| | |
| Program name: | |
| Select a campus: | |
| If you are planning to attend Kamloops campus, would you like to be considered for housing?: 🔲 Yes 💮 No | |
| *Please note: Checking "Yes" does not guarantee housing placement. | |
| | ••••• |
| Accessibility Services | |
| Please refer to our website for information regarding available accommodations and services: www.tru.ca/as or contact: | |
| Phone: 250-828-5023 Email: as@tru.ca | |
| Location: Old Main Building, Room 1631 | |
| Other information: | ••••• |
| Enter additional application information here (optional) | |
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| ACADEMIC HIS | STORY | | | | | | | | | |
|--|--|-------------------------|-------------------------------------|--------------------------------|---|---|--|--|--|--|
| Provincial Education | n Number (PEN) | | | Pers | If you are a BC resident, locate or determine your Personal Education Number (PEN). If you cannot find or do not know your PEN then visit | | | | | |
| High Schools you have attended, most recent first. Name up to 2 entries Name up to 2 entries Name up to 2 entries | | | | | | | | | | |
| Na | me | Province, Country | Date Attended Start (yyyy/mm/dd) | Date Completed (yyyy/mm/dd) | Current or Con | Current or Completed Grade | | | | |
| 1. | | | | | Less than 12 12 or equivalent IB diploma | | | | | |
| 2. | | | | | Less than 12 12 or equivalent IB diploma | | | | | |
| Post-secondary institutions you have attended, most recent first: Name up to 3 entries | | | | | | | | | | |
| Instit | ution | Province, Country | Date Attended Start (yyyy/mm/dd) | Date Completed (yyyy/mm/dd) | Credential Awarded | Date Credential Awarded (yyyy/mm/dd) | | | | |
| 1. | | | | | | | | | | |
| 2. | | | | | | | | | | |
| 3. | | | | | | | | | | |
| | | | | | | | | | | |
| Education H | Education History | | | | | | | | | |
| Any institution named in this section must also be listed as a post-secondary institution that you have attended. Any misrepresentation of information in this application may result in the cancellation of your admission or registration and such misrepresentation may be shared with other post-secondary institutions. | | | | | | | | | | |
| | _ | for longer than six mon | ths? | | | | | | | |
| Yes Provide a brief outline of your activities during this period. | | | | | | | | | | |
| _ | | | | | | | | | | |
| | | | | | | | | | | |
| □ No | | | | | | | | | | |
| Have you | | | | | | | | | | |
| ☐ Been requi | red to withdraw or | ☐ Been academica | ally suspended or | Failed a year a | at another institution? | | | | | |
| ☐ Yes Nar | me of institution | | | | | | | | | |
| Dat | Date of Withdrawal/Suspension/Failure (yyyy/mm/dd) | | | | | | | | | |
| □ No | | | | | | | | | | |
| □ No | | | | | | | | | | |

Agent Information and Release - INTERNATIONAL APPLICANTS ONLY

Do you have an educational representative or agent?

| | arr oddoddioriai ropi | | | | | | | | | | |
|--|---|--|--|--|---|--|---|--|--|--|--|
| ☐ Yes | Agent Identificati | on Number | | | | | | | | | |
| | Agency: | | | | | | | | | | |
| | Agent Name: | | | | | | | | | | |
| | Street Address: _ | | | | | | | | | | |
| | City (full name): _ | | | | | | | | | | |
| | Province: Postal Code: Country: | | | | | | | | | | |
| Phone: PrimaryOther | | | | | | | | | | | |
| | Email Address: | | | | | | | | | | |
| | I hereby authorize | e institution to rele | ase admission | s, registration, | and tuition info | rmation to t | this organization | | | | |
| | ☐ Yes | □ No □ N | lot specified | | | | | | | | |
| □ No | | | | | | | | | | | |
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| APPLICAT | ION FEE | | | | | | | | | | |
| Canadia | n/Domestic \$ | 32.27 Inte | rnational | \$100.00 | | | | | | | |
| | Options | 11160 | macroman | V 100.00 | | | | | | | |
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| | ble to Thompson Ri | | sneque or mon | | aka Cammua | | In person: | | | | |
| Kamloops Campus Open Learning Thompson Rivers University Thompson River | | 's University | Thompsor | Williams Lake Campus Thompson Rivers University | ty | Kamloops Campus: Old Main Building 1st floor Student Street (Room 1614) | | | | | |
| Enrolment Services Open Learning 805 TRU Way oladmissions@tr | | ru.ca | 1250 West Williams L | ern Ave ake, BC V2G 1H7 | 7 | Williams Lake Library Centre | | | | | |
| Kamloops | s, BC V2C 0C8 | | | | | | I | | | | |
| | ayments: Debit, cred | | - | - | | niversity | | | | | |
| Payment Dec | claration: Applicatio | ns received withou | ut the application | on fee will not | be processed | | | | | | |
| CONSENT | FOR DISCLOSU | JRE AND DECL | ARATION C | F APPLICA | NT | | | | | | |
| Declaration: | | | | | | | | | | | |
| By signing th of available re istration and as required b applicable; as | is Application, I und esources; (ii) any mis such misrepresenta by provincial or feder | srepresentation of ation may be shared al authority; (iv) my ed to a program, I a | information in d with other po y admission info m subject to th | this application ost-secondary ormation may ne policies and | on may result in t institutions; (iii) be shared with r | the cancella my persona my current h | I is subject to the limitation ation of my admission or reg- il information will be reported nigh school as needed and all statements on this ap- | | | | |
| Date (yyyy/mr | m/dd) | | Signature of A | pplicant | | | | | | | |

Privacy Notice: Thompson Rivers University (TRU) collects, uses, discloses and retains personal information in compliance with the BC *Freedom of Information and Protection of Privacy Act* (FIPPA). Your personal information is being collected and will be used for the purposes of administration, registration and other decisions on students' academic status, and for the purposes consistent with the administration of the University and its programs and services, including the programs of student societies/student unions, alumni association and the Thompson Rivers University Foundation. The collection of this information is permitted under section 26(c) of the FIPPA.