

1. APPLICANT INFORMATION

Surname:		Given Name(s):	
Date of Birth (DD/MM/YYYY):		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Country of Origin:		Visa Student: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Health Card Number:			
Street Address:			Apt. #:
City/Town:	Province:	Postal Code:	
Country:	Email:		
Phone Number (Home):		Phone Number (Mobile):	
Preferred Method of Correspondence: <input type="checkbox"/> Postal Delivery <input type="checkbox"/> Email			

2. EMERGENCY CONTACTS

THE ADMINISTRATOR MUST BE ADVISED OF ANY CHANGES TO EMERGENCY CONTACT INFORMATION.

A. Surname:		Given Name(s):	
Street Address:			Apt. #:
City/Town:	Province:	Postal Code:	
Country:	Email:		
Phone Number (1):		Phone Number (2):	
Relationship:			
B. Surname:		Given Name(s):	
Street Address:			Apt. #:
City/Town:	Province:	Postal Code:	
Country:	Email:		
Phone Number (1):		Phone Number (2):	
Relationship:			

3. ACADEMIC INFORMATION
Secondary and Post-Secondary Education Completed:

Institution	Graduating Year	Degree/Diploma

During my residence, I will be enrolled as a full-time student in the following institution:

- University of Toronto
 Ryerson University
 York University
 George Brown College
 Humber College
 OCAD University
 The Glenn Gould School
 Other:

Faculty:	Academic Year: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4
Program or Major:	Student ID Number:

4. ROOM PREFERENCE

All residence rooms are single-occupancy

Requested room size: Regular Large Suite

5. REFERENCES

You must submit two (2) Letters of Recommendation in support of your application.

Reference 1:

Surname:		Given Name(s):	
Street Address:			Apt. #:
City/Town:	Province:	Postal Code:	
Country:	Email:	Phone:	

FOR OFFICE USE ONLY

Reference 2:

Surname:		Given Name(s):	
Street Address:			Apt. #:
City/Town:	Province:	Postal Code:	
Country:	Email:	Phone:	

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6. ADDITIONAL INFORMATION

Health Concerns or Dietary Restrictions:

St. Volodymyr Institute offers a wide range of cultural activities to students: academic lecture series, art instruction, Ukrainian language courses, culinary workshops, theatre, music. I am interested in:

History Language Art Cooking Music Theatre Other:

What language(s) do you speak?

English French Ukrainian Other:

How did you hear about St. Volodymyr Institute Residence?

Internet search Website Social Media Printed Media Housing Services Fellow Students Family Other:

7. DEPOSIT FEE

A non-refundable **\$1,000.00 deposit fee**, payable to “St. Volodymyr Institute” must be submitted with this application or **before** receiving a room confirmation e-mail.

The deposit will be returned if an applicant is not accepted to St. Volodymyr Institute Residence.

8. DECLARATION AND SIGNATURE

I declare that the information reported on this form is true and correct. Upon my admission to St. Volodymyr Institute Residence, I agree to abide by the rules and regulations of the Institute.

Signature of Applicant:

Date (DD/MM/YYYY):

Submit the completed and signed form, letters of recommendation, and deposit fee to:

**ST. VOLODYMYR INSTITUTE STUDENT RESIDENCE
620 SPADINA AVENUE
TORONTO ON M5S 2H4
CANADA**

Applicants are generally notified of the Residence’s decision regarding submissions within 15 business days of receipt of a complete Residence Application.

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