



Office Use Receipt: _____
File #: _____

Office of Enrolment Management and Registrar
 9125 - 50 Street
 Edmonton, Alberta, Canada T6B 2H3
 Phone: (780) 465-3500 • Toll Free: (800)661-8582
 Fax: (780)465-8321 • E-Mail: admissions@kingsu.ca or registrar@kingsu.ca
www.kingsu.ca

APPLICATION FOR ADMISSION TO BACHELOR OF EDUCATION (AFTER DEGREE) PROGRAM

Have you previously applied to The King's University? Yes No

If yes, King's Student Identification Number: |__|__|__|__|__|__|

NAME:			
Mr. <input type="checkbox"/>	Mrs. <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms. <input type="checkbox"/> Other (Please specify Dr./Rev.) _____
			Surname or Family Name
_____	_____	_____	_____
First Name	Middle Initial	Preference Name	Former Surname(s)/Maiden Name

CURRENT ADDRESS:			
Effective Until __ __ __ __ __ __ Once this date has lapsed all correspondence will be sent to the Permanent Address below.			
Day		Month	
		Year	
_____		_____	
Apt. #	Street	City	
_____		_____	
Province/State	Postal/Zip Code	Country	Telephone
_____	_____	_____	_____
OTHER TELEPHONE: (_____)_____		E-MAIL ADDRESS: _____	

PERMANENT ADDRESS: (complete only if different than above)			
_____		_____	
Apt. #	Street	City	
_____		_____	
Province/State	Postal/Zip Code	Country	Telephone
_____	_____	_____	_____

EMERGENCY CONTACT:		
Name _____	Phone _____	Relationship _____

APPLYING FOR FALL OF: _____ (year)

PROGRAM:

Elementary Secondary (See *Teachable Major and Minors* insert)

Teachable Major: _____

Teachable Minor: _____

STATISTICAL INFORMATION:

Major Activity in the Previous Year: Student Workforce Other

Location in the Previous Year: Alberta Other Province Outside Canada

OTHER BIOGRAPHICAL AND CITIZENSHIP INFORMATION:

BIRTHDAY: |__| |__| |__| |__| |__| |__|
Day Month Year

Canadian S.I.N.: |__| |__| |__| |__| |__| |__| |__| |__| |__| |__|

MARITAL STATUS: Single/Never Married Married/Cohabitant Other **GENDER:** Male Female

CITIZENSHIP: (check one only)

Canadian Citizen - OR - Permanent Resident of Canada
 Student Authorization
 Other _____

If you did NOT check Canadian Citizen, please complete the following

Country of Citizenship: _____

Date of Entry in to Canada: |__| |__| |__| |__| |__| |__|
(Planned or Actual) Day Month Year

FIRST LANGUAGE: (check one only) English or Other (specify) _____

ENGLISH LANGUAGE PROFICIENCY:

All applicants must demonstrate English proficiency. Please select one of the following:

- Three years of formal, full-time study in a Canadian secondary or post-secondary institution with accepted English proficiency.
- Alberta English Language Arts 30-1 Diploma Examination grade of 75% or a blended grade of 80% (or equivalent).
- International Baccalaureate Higher Level English with a minimum grade of 6.0.
- Advanced Placement English with a grade of 5.0.
- ENGL 204 or 205 (or equivalent) with a grade of B- (Alpha 4.00 scale).
- Canadian Academic English Language Assessment (**CAEL**) with a minimum score of 70. Date of Exam: _____ Score: _____
- International English Language Testing System (**IELTS**) with a score of 6.5, 5.0 on each band. Date of Exam: _____ Score: _____
- Michigan English Language Assessment Battery (**MELAB**) with a score of 90. Date of Exam: _____ Score: _____
- Completion of the **ASPECT** program to level 7. Date of Exam: _____ Score: _____
- Test of English as a Foreign Language (**TOEFL**) – paper-based: 580. Date of Exam: _____ Score: _____
- Test of English as a Foreign Language (**TOEFL**) – computer-based: 237. Date of Exam: _____ Score: _____
- King's administered English Language Studies Assessment Test (**ELSAT**).

APPLICATION DEADLINE:

Applications are closed when the program is filled. B.Ed. applications are normally considered for the Fall term only. The B.Ed. program has limited space and admission is competitive. Admission decisions will be released on two dates: March 31 and May 15. The program is normally filled by June 15.

ACADEMIC INFORMATION

If your high school or previous post-secondary institution was in Alberta, please provide your Alberta Learning Student Number | _ _ | _ _ | _ _ | _ _ | _ _ | _ _ | _ _ | _ _ |

Post-Secondary Institutions

List all post-secondary institutions previously or currently attended (including The King's University). **Failure to report all post-secondary institutions attended will result in immediate dismissal without appeal.**

Name _____ City _____ Prov _____ From | _ _ | _ _ | to | _ _ | _ _ | | _ _ | _ _ | Student ID _____
year month year

Credential Received/Expected Yes No If yes, Credential Name _____ Date Received | _ _ | _ _ | | _ _ | _ _ |
month year

Name _____ City _____ Prov _____ From | _ _ | _ _ | to | _ _ | _ _ | | _ _ | _ _ | Student ID _____
year month year

Credential Received/Expected Yes No If yes, Credential Name _____ Date Received | _ _ | _ _ | | _ _ | _ _ |
month year

Name _____ City _____ Prov _____ From | _ _ | _ _ | to | _ _ | _ _ | | _ _ | _ _ | Student ID _____
year month year

Credential Received/Expected Yes No If yes, Credential Name _____ Date Received | _ _ | _ _ | | _ _ | _ _ |
month year

Name _____ City _____ Prov _____ From | _ _ | _ _ | to | _ _ | _ _ | | _ _ | _ _ | Student ID _____
year month year

Credential Received/Expected Yes No If yes, Credential Name _____ Date Received | _ _ | _ _ | | _ _ | _ _ |
month year

Name _____ City _____ Prov _____ From | _ _ | _ _ | to | _ _ | _ _ | | _ _ | _ _ | Student ID _____
year month year

Credential Received/Expected Yes No If yes, Credential Name _____ Date Received | _ _ | _ _ | | _ _ | _ _ |

ADDITIONAL INFORMATION REQUIRED

- Please submit evidence of significant work experience with children/adolescents including confirmation of this experience from a supervisor.** The type of work experience that meets this requirement may be paid or volunteer and should include working with children/adolescents in some organized group setting, e.g., Sunday school teaching, swimming instructor, recreation leader, camp counsellor, day care worker. You must provide a description of at least one of the experiences including *what* you did, *when* and for *how long* you did it as well as a letter of verification of this experience from a supervising person. Please enclose this statement with this application form.
- Please submit a 750 - 1000 word statement (typed or computer generated) which outlines your "philosophy" of education.** Included in this statement should be your reasons for wanting to become a teacher, your view of the purpose of the school in society, your view of the child and your anticipated style/approach to teaching. Please enclose this essay with this application form.
- You must also submit a personal recommendation using the enclosed form.** Please provide the form to your referee, who should mail it directly to The King's University.
- You are required to appear for a personal interview with an admission panel.** If your personal attendance is not possible, you may be required to participate in an interview by telephone or be asked to submit a video-taped response to questions asked.

DECLARATION OF APPLICANT

Read this Declaration carefully before signing. This must be signed by the applicant only.

I understand that documents submitted to The King's University become the property of the University and that neither the originals nor copies will be released to me or anyone outside the University. If I am not admitted or do not attend, I understand that the application, transcripts and other supporting documents may be destroyed at the discretion of the Registration and Student Finance. If I wish to reapply, I understand that a new set of documents may be required.

I certify that all statements made in connection with this application are true and complete in all respects, and that no information has been withheld. I understand that falsifying or omitting documents or omitting information on this application will result in immediate and permanent dismissal from King's and the placement of my name on *Document Alert*, a warning notification list used by Canadian post-secondary institutions. Falsified documents may be referred to appropriate government authorities. The University reserves the right to refuse admission or cancel any admission ruling on medical or other grounds. Completion of this application gives express permission to The King's University to request from other institutions any applicant transcripts in addition to those already submitted.

I acknowledge that the information on this application is required to determine my eligibility for admission and will be used to contact me regarding King's programs and services. If admitted, it will form part of my student record and will be disclosed to relevant academic and administrative departments. Specific data elements will be disclosed to federal and provincial governments to meet reporting requirements.

I agree, if admitted to The King's University, to comply with all rules and regulations of the University.

Signature of Applicant

Date

APPLICATION CHECKLIST [✓] PLEASE READ CAREFULLY.

- I have **read** the application form carefully and completed all sections; and I have **signed** the Declaration section.
- I have **included my application fee**.
- I have **requested or included any record of courses now in progress**.
- I have **ordered an official copy of my post-secondary transcripts**. An **official transcript** is one that has been forwarded directly to the Registration and Student Finance Office from the issuing institution. *Graduates of The King's University need not submit a transcript for that portion of their post-secondary work, nor other transcripts already in the possession of the University.*
- I have included other required supporting documents: **Evidence of Significant Work Experience with Children/Adolescents including confirmation of this experience from a supervisor and a 750-1000 word statement which outlines my "philosophy" of education.**
- I have **arranged for my Personal Recommendation form to be completed and sent to King's**.
- If needed to demonstrate English proficiency, I have requested that my English test scores be sent directly to King's.

OFFICE USE ONLY:

Admission Decision: _____ Status: _____

Basis of Decision: _____

Admission Officer

Date

Additional Optional Information

Office Use
File #: _____

The information requested on this page does not form part of the admission standards of The King's University. These questions are asked to aid us in processing your application and to improve our recruitment and development practices. You may decline to complete any of these questions.

Are you a Christian? Yes No Please elaborate.

Home Church: _____ City: _____

Religious affiliation or denomination: _____

If you need to authorize someone else to act on your behalf in regard to this application, please complete this section. Unless you authorize another individual to act on your behalf personal, application or registration information will not be released to others. You may also designate someone by contacting the Office of Enrolment Management and Registrar and completing the appropriate form.

Name _____ Should we send mail regarding your application to this address instead of your current address?

Address _____ Yes No

Phone (_____) _____ - _____

NOTE: this authorization will expire on the Add/Drop deadline of the first term of admission.

I initially heard about The King's University through: (Check as many as apply.)

Billboard Ad Print Ad Radio Ad TV Ad Faculty or Staff

Former King's Student Family Friend School Contact King's Website

Other Internet Source

Other _____

Please send me information on the following: **(information will only be mailed until the applicable deadline.)**

Student Housing Campus Employment* Financial Aid** Private Music Instruction Varsity Athletics

*Note: Application deadline May 15. **Note: Application deadline March 31.

If you wish to declare that you are an Aboriginal person, please specify:

Status Indian/First Nations Non-Status Indian/First Nations Métis Inuit

ALBERTA ADVANCED EDUCATION AND TECHNOLOGY IS COLLECTING THIS PERSONAL INFORMATION PURSUANT TO SECTION 33(C) OF THE FOIP ACT AS THE INFORMATION RELATES DIRECTLY TO AND IS NECESSARY TO MEET ITS MANDATE AND RESPONSIBILITIES TO MEASURE SYSTEM EFFECTIVENESS OVER TIME AND DEVELOP POLICIES, PROGRAMS AND SERVICES TO IMPROVE ABORIGINAL LEARNER SUCCESS.

For further information or if you have questions regarding the collection activity, please contact the Office of the Director, Business Operations and Reporting, Post-secondary Excellence Division, Alberta Advanced Education and Technology, 10155-102 Street, Edmonton AB, T5J 4L5, (780) 427-7145 or your institution's Registrar's Office.

Parent or Guardian Names and Addresses

1) Name _____ 2) Name _____

Address _____ Address _____

Phone (_____) _____ - _____ Phone (_____) _____ - _____

Church: _____ Church: _____

APPLICANT NAME: _____

TEACHABLE SUBJECTS FOR SECONDARY EDUCATION

MAJORS

Biology/Environmental Studies (Biology, Environmental Studies, Environmental Economics, Human Geography, GIS, Philosophy of the Environment, Theology of Creation. If presenting courses from more than one subject, at least three must be presented with senior courses in at least two)

Chemistry

Career and Technology Studies: Business (Accounting, Business, Finance, Human Resources, Management, Marketing)

Career and Technology Studies: Computing Science

English Language Arts

General Physical Science (Biology, Chemistry, Physics, or Physical Geography. If presenting courses from more than one subject, at least three subjects must be presented with senior courses in at least two)

General Sciences (Biology, Chemistry, Physics, Physical Geography, Mathematics, Computing Science. If presenting courses from more than one subject, at least three must be presented with senior courses in at least two)

Mathematics

Music

Social Studies (Anthropology, Economics, Educational Psychology, History, Human Geography, Political Science, Psychology, Sociology or Theology/Biblical Studies/Religious Studies. If presenting courses in more than one subject, at least three must be presented with senior courses in at least two)

MINORS

Art (Studio Art, Art History)

Biology/Environmental Studies (Biology, Environmental Studies, Environmental Economics, Human Geography, GIS, Philosophy of the Environment, Theology of Creation. If presenting courses from more than one subject, at least three must be presented with senior courses in at least two)

Chemistry

Career and Technology Studies: Business (Accounting, Business, Finance, Human Resources, Management, Marketing)

Career and Technology Studies: Computing Science

Drama

English Language Arts

General Physical Science (Biology, Chemistry, Physics, or Physical Geography. If presenting courses from more than one subject, at least three subjects must be presented with senior courses in at least two)

General Sciences (Biology, Chemistry, Physics, Physical Geography, Mathematics, Computing Science. If presenting courses from more than one subject, at least three must be presented with senior courses in at least two)

Mathematics

Music

Physical Education (Physical Education, Kinesiology, and Physical Activity)

Physics*

Second Languages* (French, Spanish, German, Italian, Dutch, Japanese. If presenting courses from more than one language, at least three must be presented with senior courses in at least two)

Social Studies (Anthropology, Economics, Educational Psychology, History, Human Geography, Political Science, Psychology, Sociology or Theology/Biblical Studies/Religious Studies. If presenting courses in more than one subject, at least three must be presented with senior courses in at least two)

**PERSONAL RECOMMENDATION FOR
BACHELOR OF EDUCATION (AFTER DEGREE) PROGRAM**

Applicant's Name: _____

Address: _____

To the Applicant:

The above information is to be filled in by you. This recommendation form is then given to someone (not a relative) from an educational or professional setting who knows you well and can speak to your aptitude to teach. The form must be returned by that person directly to The King's University.

An applicant has the right to examine any document in his/her file. However, to provide your reference with the option of confidentiality, you may elect to waive your right to examine this document by signing below.

Signature of Applicant

To the person completing this recommendation:

Please return this form directly to the following address.

Registration and Student Finance Office • The King's University • 9125 50 Street • Edmonton • AB • T6B 2H3 • Fax 780-465-8321

The above applicant is applying for admission to The King's University's Bachelor of Education (After Degree) program. In order to help us make an admission decision, please provide the following information:

- 1) What is your relationship to the applicant and how long have you been acquainted with this person?

- 2) In your opinion, would the applicant be comfortable with and respect the Christian mission of the University?

- 3) In your opinion, is the applicant suited to teach at the elementary or secondary level? Please explain why or why not.

Please feel free to attach an additional sheet to explain or provide additional comments.

Name: _____ Occupation: _____

Signature: _____ Date: _____

Telephone Number: () _____