

## PERSONAL INFORMATION (Please Print Clearly)

Given Name: \_\_\_\_\_  
 Middle Name(s): \_\_\_\_\_  
 Family Name: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ (dd/mm/yyyy) Gender:  Male  Female  Other  
 First Language: \_\_\_\_\_ Nationality: \_\_\_\_\_  
 Current English Level:  
 Beginner  Lower Intermediate  Upper Intermediate  Advanced

### Visa type you will study on:

<input type="checkbox"/> Student Visa	<input type="checkbox"/> Visitor Visa	<input type="checkbox"/> Working Holiday Visa	<input type="checkbox"/> Other
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### Do you require a Notarized Custodial Letter? (Under 19 years)

<input type="checkbox"/> Yes - Notarized	<input type="checkbox"/> No
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### Do you require a Letter of Acceptance by Express Courier for a fee?

<input type="checkbox"/> Yes	<input type="checkbox"/> No
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### Do you have any physical or mental health challenges?

Please provide details so that we can be prepared to best support you.

<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Details: \_\_\_\_\_

## ADDRESS IN HOME COUNTRY:

Street: \_\_\_\_\_  
 City: \_\_\_\_\_ Province/State: \_\_\_\_\_  
 Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Telephone: \_\_\_\_\_  
 Email: \_\_\_\_\_

## IMMEDIATE CONTACT (IF DIFFERENT FROM HOME ADDRESS)

Street: \_\_\_\_\_  
 City: \_\_\_\_\_ Province/State: \_\_\_\_\_  
 Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Telephone: \_\_\_\_\_  
 Email: \_\_\_\_\_

## INTENDED PERIOD OF STUDY

Number of weeks: \_\_\_\_\_  
 Start date: \_\_\_\_\_ (dd/mm/yyyy)  
 End date: \_\_\_\_\_ (dd/mm/yyyy)

## COURSES (Contact school for Course Availability)

### ADULT PROGRAMS - FULL TIME

(LPW = Lessons Per Week)

(F2F = Face-to-Face)

GENERAL ENGLISH PROGRAM (GEP)	<input type="checkbox"/> 20 LPW	<input type="checkbox"/> 25 LPW	<input type="checkbox"/> 30 LPW	_____	<input type="checkbox"/> F2F	<input type="checkbox"/> GV Live
BUSINESS ENGLISH (BEP-30)		<input type="checkbox"/> 25 LPW	<input type="checkbox"/> 30 LPW	_____	<input type="checkbox"/> F2F	<input type="checkbox"/> GV Live
ENGLISH FOR ACADEMIC PATHWAYS (EAP-30)	<input type="checkbox"/> 20 LPW	<input type="checkbox"/> 25 LPW	<input type="checkbox"/> 30 LPW	_____	<input type="checkbox"/> F2F	<input type="checkbox"/> GV Live
ACADEMIC YEAR / GAP YEAR PROGRAM	<input type="checkbox"/> 20 LPW	<input type="checkbox"/> 25 LPW	<input type="checkbox"/> 30 LPW	_____	<input type="checkbox"/> F2F	<input type="checkbox"/> GV Live
GAP SEMESTER PROGRAM	<input type="checkbox"/> 20 LPW	<input type="checkbox"/> 25 LPW	<input type="checkbox"/> 30 LPW	_____	<input type="checkbox"/> F2F	<input type="checkbox"/> GV Live
GLOBAL COMPETENCE CERTIFICATE			<input type="checkbox"/> 30 LPW	_____	<input type="checkbox"/> F2F	<input type="checkbox"/> GV Live
CAMBRIDGE PREPARATION (B1 First)			<input type="checkbox"/> 30 LPW	_____	<input type="checkbox"/> F2F	<input type="checkbox"/> GV Live
CAMBRIDGE PREPARATION (C1 Advanced)			<input type="checkbox"/> 30 LPW	_____	<input type="checkbox"/> F2F	<input type="checkbox"/> GV Live
IELTS PREPARATION	<input type="checkbox"/> 20 LPW	<input type="checkbox"/> 25 LPW	<input type="checkbox"/> 30 LPW	_____	<input type="checkbox"/> F2F	<input type="checkbox"/> GV Live
GV PATHWAYS: UNIVERSITY/COLLEGE						
INSTITUTION OF CHOICE:					MAJOR OF CHOICE:	

### ADULT PROGRAMS - PART TIME

GENERAL ENGLISH PROGRAM (GEP)	<input type="checkbox"/> 5 LPW	<input type="checkbox"/> 7.5 LPW	<input type="checkbox"/> 10 LPW	_____	<input type="checkbox"/> F2F	<input type="checkbox"/> GV Live
BUSINESS ENGLISH (BEP)	<input type="checkbox"/> 5 LPW	<input type="checkbox"/> 10 LPW		_____	<input type="checkbox"/> F2F	<input type="checkbox"/> GV Live
GLOBAL COMPETENCE CERTIFICATE		<input type="checkbox"/> 10 LPW		_____	<input type="checkbox"/> F2F	<input type="checkbox"/> GV Live
CAMBRIDGE PREPARATION (B1 First)		<input type="checkbox"/> 10 LPW		_____	<input type="checkbox"/> F2F	<input type="checkbox"/> GV Live
CAMBRIDGE PREPARATION (C1 Advanced)		<input type="checkbox"/> 10 LPW		_____	<input type="checkbox"/> F2F	<input type="checkbox"/> GV Live
IELTS PREPARATION	<input type="checkbox"/> 7.5 LPW			_____	<input type="checkbox"/> F2F	<input type="checkbox"/> GV Live
CELPPI PREPARATION	<input type="checkbox"/> 7.5 LPW			_____	<input type="checkbox"/> F2F	<input type="checkbox"/> GV Live
PRIVATE LESSONS (General English)	SPECIFY PROGRAM:			NUMBER OF LPW:	<input type="checkbox"/> F2F	<input type="checkbox"/> GV Live
PRIVATE LESSONS (Test Prep - IELTS, CELPIP, Etc.)	SPECIFY PROGRAM:			NUMBER OF LPW:	<input type="checkbox"/> F2F	<input type="checkbox"/> GV Live
ADD-ON ACTIVITY PACKAGE	SPECIFY ACTIVITY:				<input type="checkbox"/> F2F	<input type="checkbox"/> GV Live

### JUNIOR PROGRAMS

GENERAL ENGLISH PROGRAM (GEP-30)	AGES: 16+	<input type="checkbox"/> 20 LPW	<input type="checkbox"/> 25 LPW	<input type="checkbox"/> 30 LPW	<input type="checkbox"/> F2F	<input type="checkbox"/> GV Live
SUMMER TEEN ACTIVITY PROGRAM (20 LPW)	AGES: 12-17	SPECIFY # OF WEEKS (2-8 WEEKS):			<input type="checkbox"/> F2F	<input type="checkbox"/> GV Live
HIGH SCHOOL PREPARATION (30 LPW)	AGES: 15+	SPECIFY # OF WEEKS:			<input type="checkbox"/> F2F	<input type="checkbox"/> GV Live

## ACCOMMODATION INFORMATION (Please Print Clearly)

### ACCOMMODATION PREFERENCES

#### ACCOMMODATION REQUIRED?

Yes	No
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#### EXPECTED PERIOD OF ACCOMMODATIONS?

Number of weeks?
Arriving date: (dd/mm/yyyy)
Departing date: (dd/mm/yyyy)

#### TYPE OF ACCOMMODATION REQUESTED? (Choose one)

<b>Homestay</b>	<b>Guest Suite</b>
<b>Executive Homestay (19+)</b>	<b>Hotel</b>

Contact school directly for availability of Guest Suites and Hotel.

#### HOMESTAY MEAL OPTIONS:

Where available. Check fee sheet.

<b>Full Board catering meal plan</b>
<b>Self Catering</b> (No meals)

#### HOMESTAY ROOM OPTIONS:

Where available. Check fee sheet.

<b>Single Room</b>
<b>Double Room</b> (Must be booked with second student; 2x single beds not guaranteed)

#### PLACEMENT PREFERENCE:

Please List your order of preference from 1-3 (1 is your first choice)

\*GV cannot guarantee your first choice.

-	Family with Children
-	Family with Teenagers
-	Family without Children
	Does not matter

### EMERGENCY CONTACT PERSON:

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

#### HOW DID YOU FIND OUT ABOUT GLOBAL VILLAGE VICTORIA?

Agent	Friend	Ad	Website	Social Media
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Please give details: \_\_\_\_\_

### PERSONAL INFORMATION

#### DO YOU HAVE ANY ALLERGIES? IF YES, GIVE DETAILS.

Yes	No
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Details: \_\_\_\_\_

#### DO YOU HAVE ANY SPECIAL DIETARY NEEDS? IF YES, GIVE DETAILS.

Yes	No
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\*Additional fees may apply.

Details: \_\_\_\_\_

#### DO YOU SMOKE?

Yes	No
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#### WILL YOU LIVE WITH A FAMILY WITH:

Smokers	Yes	No
Dogs	Yes	No
Cats	Yes	No
Young Children	Yes	No

#### WHAT ARE YOUR INTERESTS?

Details: \_\_\_\_\_

#### IS THERE ANY OTHER INFORMATION GV SHOULD KNOW ABOUT YOU?

Details: \_\_\_\_\_

### TRAVEL DETAILS

#### FLIGHT DETAILS:

Airline & Flight number:
Arriving date (dd/mm/yyyy):
Arrival time (hr/min):

#### VICTORIA AIRPORT TRANSFER:

None	One Way	Two Way
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### DECLARATION

I have read and agree to be bound by the General Conditions and the Cancellation and Refund Policy. I agree that the school may disclose my student enrollment details, grades, and attendance to the government as requested.

Name (Print): \_\_\_\_\_

Signature: \_\_\_\_\_

Signature of applicant, or parent/guardian if applicant is under 19 years old.

#### METHOD OF PAYMENT

Bank Transfer	PayPal	E-Transfer	Other
VISA	Mastercard	Cash	

**PLEASE E-MAIL REGISTRATION FORMS TO:**

Email: [victoria@gvenglish.com](mailto:victoria@gvenglish.com)