



ACADIA

UNIVERSITY

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School of Education

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2006-07

Bachelor of Education

Application for Admission

INSTRUCTIONS FOR BEd APPLICANTS

Thank you for considering Acadia University. Please read these instructions carefully before proceeding to complete the application form. It is easy and you are in charge!

Application Procedure

This application is used by all students seeking admission to the Bachelor of Education degree program. Please provide all of the information requested. Your application will be considered when all of the supporting documents have been received. Applicants are reminded that it is their responsibility to collect and submit all required documentation to the Admissions Office. **Please do NOT send an incomplete package.**

Deadline: January 31, 2006 at 4:30 pm

Applications will be considered after the deadline until all available positions in the program are filled.

Note: It is often difficult to locate applicants during the summer months. Please ensure that your permanent or temporary address is valid during this time.

Use this list to check off each part of the application and include it in your package:

- Application for Admission form
- Processing fee \$35 Canadian
- Transcripts
TWO official copies from **every** post secondary institution attended, except Acadia University.
- Supplementary Package
 - Personal Statement (Part A)
 - Experience Profile (Part B)
 - Academic/ Teacher Certification Requirements (Part C) (Complete Elementary **OR** Secondary)
 - Three References (Part D)

Additional Information:

1. The Acadia School of Education values and actively recruits students of racially and culturally diverse backgrounds, and is committed to providing a supportive learning environment. If you are a member of a particular ethno-cultural community (Aboriginal, Acadian, African-Canadian, Asian, etc.) and wish to identify yourself, please comment in the Supplementary Package, Part B (2b).
2. The School of Education also recognizes that certain extenuating life circumstances may have prevented some applicants from meeting or exceeding the 2.67 (70%) GPA requirement. If you feel this situation applies to you, please give details of your individual circumstances in the Supplementary Package, Part C.
3. Before entering the schools for field experience, students are required by school boards to undergo a Criminal Record and Child Abuse Registry check. If you feel either of these requirements may be a problem, we recommend you contact the School of Education.

Residence Accommodation

An application for residence accommodation will be forwarded to you with an offer of admission if you are accepted to the program.

BACHELOR OF EDUCATION APPLICATION FOR ADMISSION

Acadia ID Number

Application for session >	Fall-Winter <input type="checkbox"/> (Sept-May)	Starting in Year			Canadian Social Insurance Number:
If you have previously applied to Acadia, state when:		If you did so under a different surname, please print here >		If you have previously taken courses from Acadia, state when:	
Surname		All Given Names (Do not use abbreviations. Underline your preferred name.)		Title - Mr./Miss/Ms/Mrs./etc.	
We recognize that documents may arrive under a different name. Please indicate any former name(s).					
Permanent Mailing Address (PO Box/Street/Apartment)			County		Telephone Number
Postal Code	Town/City	Province/State	Country		
Temporary Mailing Address (PO Box/Street/Apartment) if applicable			County		Telephone Number
Postal Code	Town/City	Province/State	Country		
Expire Date for Temporary Mailing Address: (y/m/d)		Birth Date (for reference only) (y/m/d)		Sex M <input type="checkbox"/> F <input type="checkbox"/>	
Email Address: (print clearly)					Fax Number
Next of Kin -please indicate Mr./Miss/Ms/Mrs./etc.				Relationship	
Address of Next of Kin					Telephone Number
Town/City		Province/State	Postal Code	Country	
Name of Nearest Relative who Attended Acadia -Please Indicate Mr./Miss/Ms/Mrs./etc. (for alumni records only)				Relationship	
				Office Use: <input type="checkbox"/> Cumulative <input type="checkbox"/> Major <input type="checkbox"/> Last 2 years	
Intended Program	BEd	Intended Major (choose one)	ELEM <input type="checkbox"/>	SECO <input type="checkbox"/>	
Mother Tongue English <input type="checkbox"/> French <input type="checkbox"/> Other <input type="checkbox"/>		Immigration Status Canadian <input type="checkbox"/> or		Student Visa <input type="checkbox"/>	If you are Student Visa or Permanent Resident, specify Country of Citizenship
		Permanent Resident <input type="checkbox"/>			
Previous Education Information - List All Institutions Attended (Use a separate sheet of paper if necessary.)					
	Name of School	Location (City/Town, Province, Country)		Degree granted	Major & Minor
High School:					
Colleges/ Universities:					
Was English your language of instruction?		Yes <input type="checkbox"/>	No <input type="checkbox"/>		
In this Current Academic Year are you Attending: (check only one)		College <input type="checkbox"/>	University <input type="checkbox"/>	No Educational Institution <input type="checkbox"/>	

At Acadia we like to consider each applicant on an individual basis. Although academic criteria will be our primary focus, all available information contributes to our understanding and appreciation of our potential students. Applications and supporting documentation are considered to be confidential.

1. Acadia University is committed to the academic and personal development of students. We recognize that students often require assistance to ensure success. Do you have any special needs (learning/physical disabilities, medical conditions) that you would like us to be aware of at this point?

2. What factor had the most influence on your decision to apply to Acadia?

- | | | | |
|--|---|--|-------------------------------------|
| <input type="checkbox"/> Program of choice | <input type="checkbox"/> Acadia Advantage | <input type="checkbox"/> MacLean's ranking | <input type="checkbox"/> Reputation |
| <input type="checkbox"/> Family tradition | <input type="checkbox"/> Location | <input type="checkbox"/> Campus Tour | <input type="checkbox"/> Other |

3. How did you learn about Acadia?

- | | | | |
|---|---|---|-----------------------------------|
| <input type="checkbox"/> Guidance Counsellor | <input type="checkbox"/> Visit to your school | <input type="checkbox"/> Open House | <input type="checkbox"/> Web site |
| <input type="checkbox"/> Alumni/Parent/Friend | <input type="checkbox"/> MacLean's magazine | <input type="checkbox"/> Summer youth program | <input type="checkbox"/> Other |

I acknowledge that this information is collected to determine my eligibility for admission and scholarship and may be used for compatible purposes as contact information regarding university programs, services, university advancement and development. If admitted, it will form part of the student record and may be disclosed to faculty or members of the university staff for officially recognized and legitimate use. I certify that all of the information provided on this application is correct. Acadia University is authorized to verify any information provided as part of the application and I understand that admission granted on the basis of this application or supporting documents will be revoked if the information given is untrue in any material respect. I authorize my school, college or university to release pertinent information, on a confidential basis, to Acadia University to aid in the evaluation of my admissibility and eligibility for awards and prizes. All documents are routinely verified. Information about falsified documents is shared with the Association of Universities and Colleges of Canada. Information and documents received for persons who do not register by their expected date are retained for one year beyond the expected date of registration and then destroyed.

I agree to follow and be bound by the regulations of the University.

_____ Date

_____ Signature of Applicant

\$35 application processing fee payable to Acadia University is enclosed. Please mark the appropriate box.				
Cheque <input type="checkbox"/>	Money Order <input type="checkbox"/>	Visa <input type="checkbox"/>	Master Card <input type="checkbox"/>	American Express <input type="checkbox"/>
Credit Card Number: _____		Expires ____ / ____ (Month/Year)		
Card Holder's Name: _____				