



VANCOUVER ACADEMY OF MUSIC
S.K. LEE COLLEGE

1270 Chestnut Street
 Vancouver, BC V6J 4R9 Canada
 FAX 604 731 1920 • TEL 604 734 2301
 admin@vam.bc.ca • www.vam.bc.ca

APPLICATION FORM
Bachelor of Music Program
& Artistic Diploma Program

 DATE

LAST NAME			FIRST			INITIAL			MALE <input type="checkbox"/>		FEMALE <input type="checkbox"/>						
PRESENT MAILING ADDRESS												CITY		PROVINCE/STATE		POSTAL/ZIP CODE	
SOCIAL INSURANCE/SOCIAL SECURITY NUMBER								TELEPHONE									
DATE OF BIRTH			PLACE OF BIRTH			CITIZENSHIP			CANADIAN RESIDENCY STATUS*								
MARITAL STATUS				SPOUSE'S OCCUPATION				NUMBER OF CHILDREN									
NAME OF PARENTS OR GUARDIAN (Circle one)								TELEPHONE NUMBER									
ADDRESS OF PARENTS OR GUARDIAN				CITY				PROVINCE/STATE		POSTAL/ZIP CODE							
FATHER'S OCCUPATION & TITLE				BUSINESS ADDRESS				TELEPHONE									
MOTHER'S OCCUPATION AND TITLE				BUSINESS ADDRESS				TELEPHONE									

*Complete this item only if you are not a Canadian Citizen. Are you a permanent Resident in Canada or will you be in Canada under a Student/Study Visa?

CHECK MAJOR FIELD OF STUDY YOU WISH TO PURSUE

<input type="checkbox"/> VOICE	<input type="checkbox"/> PIANO	<input type="checkbox"/> OBOE	<input type="checkbox"/> PERCUSSION
<input type="checkbox"/> SOPRANO	<input type="checkbox"/> HARP	<input type="checkbox"/> CLARINET	<input type="checkbox"/> OTHER
<input type="checkbox"/> MEZZO	<input type="checkbox"/> VIOLIN	<input type="checkbox"/> BASSOON	
<input type="checkbox"/> CONTRALTO	<input type="checkbox"/> VIOLA	<input type="checkbox"/> HORN	
<input type="checkbox"/> TENOR	<input type="checkbox"/> VIOLINCELLO	<input type="checkbox"/> TRUMPET	
<input type="checkbox"/> BARITONE	<input type="checkbox"/> DOUBLE BASS	<input type="checkbox"/> BASS TRUMBONE	
<input type="checkbox"/> BASS	<input type="checkbox"/> FLUTE	<input type="checkbox"/> TUBA	

 TEACHER PREFERENCE

CHECK PROGRAM TO WHICH YOU ARE APPLYING BACHELOR OF MUSIC ARTIST DIPLOMA

ARE YOU PRESENTLY STUDYING YOUR INSTRUMENT WITH A TEACHER? YES NO

NAME _____ ADDRESS _____

ARE YOU PRESENTLY ENROLLED IN A SCHOOL OF MUSIC? YES NO

NAME _____ ADDRESS _____

PLEASE PROVIDE DETAILS OF ANY AWARDS, SCHOLARSHIPS, ETC. THAT YOU MAY HAVE RECEIVED

RECEIVED FROM	DATE RECEIVED
RECEIVED FROM	DATE RECEIVED
RECEIVED FROM	DATE RECEIVED

HAVE YOU PRVIOUSLY AUDITIONED AT THE VANCOUVER ACADEMY OF MUSIC? YES NO

 DATE OF PREVIOUS AUDITION

Music Education *Please arrange chronologically and include teacher or music school.*

SUBJECT	PRIVATE TEACHER/SCHOOL	ADDRESS	FROM (MONTH/YEAR)	TO (MONTH/YEAR)

General Education *other than high school and college*

High School and College Attended

NAME AND ADDRESS	FROM (MONTH/YEAR)	TO (MONTH/YEAR)	GRADUATION YEAR	MAJOR	DEGREES

What is your ultimate aim in studying music?

Your completed Application Form must be sent to the Registrar's Office with all of the following included:

1. Completed Application for Admission (available through the Registrar's Office)
2. Application Fee of \$36.00 (non refundable)
3. Transcripts from secondary schools and colleges attended
4. Two Evaluation Forms from professional musicians, either teachers or performers
5. Scores from Test of English as a Foreign Language (TOEFL) for all students who are not Canadian students and not native speakers of English. These can be obtained by writing to:
 TOEFL Education Testing Services
 CN 6155
 Princeton, New Jersey 08541-6155, USA
 Vancouver Academy of Music Code Number: 9958

