



TORONTO ACADEMY OF ACTING FOR FILM & TELEVISION
215-1179 KING STREET WEST TORONTO, ONTARIO M6K 3C5
TRAINING FACILITY: 219 DUFFERIN STREET, UNIT #1D, TORONTO, ON
416-536-8574 FAX 416-536-0227
register@torontoacademyofacting.com

**2018 CANADIAN APPLICATION FORM FOR ADMISSION FULL TIME FOUR MONTH FILM ACTING
DIPLOMA PROGRAM “ESSENTIALS FOR ACTING”**

APPROVED AS A VOCATIONAL PROGRAM UNDER THE PRIVATE CAREER COLLEGES ACT 2005

Each applicant who is applying for admission to the Academy is required to furnish the information necessary for the Academy’s records.

- 1) Graduation from a secondary school with a copy of Diploma to be submitted, or equivalent OR

If you have not completed High School with a Diploma but are at least eighteen years of age applicant will have to pass a program called “Wonderlic”, a Superintendent approved qualifying test which is provided by the Academy. Student can either attend in person at the Academy to do the test or ask to do the test on line. Test results must be submitted with the application form.

- 2) Must be Canadian citizens, Canadians residing outside of Canada, Naturalized Canadians, or Landed Immigrants must provide: Proof of Canadian Citizenship or Proof of Landed Immigrant Status.

In addition to completing the form above, please pick one of the two following options to submit:

OPTION A

- A picture of yourself
- One to two letters of reference (not by family members)
- A statement of personal interest explaining in detail, in your own words, your reasons for applying to the school, any past skills you feel are related, your future goals and ambitions once you have completed the program (250-500 words).
- Student can audition in person by presenting a two to three minute film monologue piece

If you intend to pick this option and audition, please specify here: Y N

OPTION B

- A picture of yourself
- Two letters of reference (not by family members)
- A video of the applicant discussing why they want to train as a professional film actor and why they would be a good candidate for the Academy, plus a two minute monologue. Applicants are to upload the video to YouTube and provide the URL along with their application.

Provide the URL to your video here:



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PLEASE FILL OUT ALL INFORMATION

SURNAME: _____

FIRST NAME: _____

MR.

MRS.

MS.

AGE: _____

PERMANENT ADDRESS:

MAILING ADDRESS (IF DIFFERENCE FROM ABOVE):

POSTAL CODE: _____

HOME PHONE: _____

CELL PHONE: _____

E-MAIL ADDRESS: _____

DATE OF BIRTH (DD/MM/YYYY): _____

EMERGENCY CONTACT (DAY): _____

RELATIONSHIP: _____

EMERGENCY CONTACT (EVENING): _____

RELATIONSHIP: _____



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October 15, 2018

Tuition:	\$7, 500.00 CDN
	\$900.00 CDN for three professionally edited film scenes
	<u>\$136.00 CDN for textbooks</u>
TOTAL:	\$8, 536.00 CDN

To apply, send the completed application and all required materials to:
register@torontoacademyofacting.com

In Person: Head Office 1179 King Street West, Suite #215, Toronto, ON

Regular Mail or Courier: 1179 King Street West, Suite #215, Toronto, ON M6K 3C5 Canada
Attention Admission Dept.



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ADMISSION GUIDELINES & TUITION FEE

If student is accepted into the program, the student will receive a letter of acceptance together with an enrollment contract to be entered into between the Academy and the student. Tuition fee for Canadian students is \$7,500.00 plus \$900.00 for three professionally edited film scenes for the students demo reel. There is an additional fee for books \$136.00. Student who accepts the enrollment contract must sign the enrollment contract and return a signed copy by email or fax to the Academy within 10 days of receipt of the enrollment contract. Original signed copy is to be brought to administration first day of training, together with the tuition fee as well as the additional fees the first day of class. Tuition fee, books and fee for editing can be paid by way of certified cheque, money order, credit card payment or on line E-Transfer.

I _____ acknowledge by signing that I have read and understand the entire content of the aforementioned agreement.

Signature of Applicant
18 years of age or older

Signature of Witness

Student processing payment of \$150.00 by cheque Yes____ No ____ If yes please mail hard copy of the application form together with your certified cheque or money order to 1179 King Street West, Suite #215, Toronto, Ontario, M6K 3C5 . Please note administration fee of \$150.00 is non refundable.

If the Student is processing payment of \$150.00 by credit card please fill out below.

VISA MASTERCARD

Credit Card V/M/ No._____

Expiry Date_____

Card Holder's Name_____

3 digit Security Code _____ (on back of credit card)

I hereby authorize the Toronto Academy of Acting for Film & Television to process the Credit card no. for the above amount

Signature of Cardholder

Student will require housing if accepted into the program YES NO