



**TORONTO ACADEMY OF ACTING FOR FILM & TELEVISION**  
219 DUFFERIN STREET, UNIT #1D, TORONTO, ON M6K 3J1  
416-536-8574 FAX 416-536-0227  
register@torontoacademyofacting.com

**2022 INTERNATIONAL 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 show proof of country citizenship.
- 3) Two letters of reference (not by family members)
- 4) A statement of personal interest explaining in detail, in your own words, your reasons for applying to the Academy, any past skills student can apply to this program, your future goals and ambitions once you have completed the program (250-500 words).
- 5) 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: \_\_\_\_\_
- 6) A picture of yourself



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**PLEASE FILL OUT ALL INFORMATION**

SURNAME: \_\_\_\_\_

FIRST NAME: \_\_\_\_\_ MR. MRS. MS.

AGE: \_\_\_\_\_

PERMANENT ADDRESS:

MAILING ADDRESS (IF DIFFERENCE FROM ABOVE):

ZIP 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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**SELECT WHICH SEMESTER YOU WISH TO ATTEND**

Tuition:           \$11,000.00 CDN  
                          1356.00 CDN for four professionally edited film scenes

TOTAL:            \_\_\_\_\_

\$12,356.00 CDN

To apply, send the completed application and all required materials to:  
[register@torontoacademyofacting.com](mailto:register@torontoacademyofacting.com)

In Person:        219 DUFFERIN STREET, UNIT #1D, TORONTO, ON M6K 3J1

Regular Mail or Courier:        219 DUFFERIN STREET, UNIT #1D, TORONTO, ONTARIO M6K 3J1



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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 International students is \$11,000.00 Canadian funds. Additional fees are \$1,200.00 CDN. for four professionally edited film scenes and \$136.00 for books. Student who accepts the enrollment contract will sign the enrollment contract and email or fax a signed copy of the enrollment contract to the Academy no later than ten business days after acceptance of the enrollment contract. After receipt of the signed enrollment contract by the Academy student will pay a deposit of \$3,500.00 to be applied towards their tuition fee. Balance of the tuition fee together with additional fees are to be paid in full first day of training. Tuition fee and books can be paid by way of certified cheque, money order, credit card payment, on line E-Transfer or have funds wired into the Academy’s account

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 219 DUFFERIN STREET, UNIT #1D, TORONTO, ONTARIO. M6K 3J1

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