



TORONTO ACADEMY OF ACTING FOR FILM & TELEVISION
219 DUFFERIN STREET, UNIT #1D, TORONTO, ON M6K 3J1
416-536-8574 /647 280 7407
admin@torontoacademyofacting.com

**2024 INTERNATIONAL APPLICATION FORM FOR ADMISSION FULL TIME FOUR
MONTH FILM ACTING DIPLOMA PROGRAM “ESSENTIALS FOR ACTING”**

*APPROVED AS A VOCATIONAL PROGRAM UNDER THE ONTARIO CAREER COLLEGES ACT,
2005 AND THE REGULATIONS MADE UNDER THE ACT.*

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 or post 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 nineteen years of age and older in order to pass a Superintendent approved qualifying test known as the “Wonderlic”, which is provided by the Academy on line. Test results must be submitted with the application form OR
- 2) A General Education Development (GED) Certificate issued by a Canadian province or territory or from the United States
- 3) Must show proof of country citizenship.
- 4) Two letters of reference (not by family members)
- 5) 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).
- 6) 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: _____
- 7) A picture of yourself
- 8) International students must have a good command of the English language written spoken & read as well as provide a copy of their TOEFL score or I.E.L.T.S. English score if English is not their first language. Score should be at least 6.0.



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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

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

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

