

TORONTO ACADEMY OF ACTING FOR FILM & TELEVISION 219 DUFFERIN STREET, UNIT #1D, TORONTO, ONT, M6K 3JI 416-536-8574/647 280 7407

admin@torontoacademyofacting.com

2025 CANADIAN 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) Have an Ontario Secondary School Diploma or equivalent and be at least 18 years of age OR
- 2) Be 18 years of age or older and pass a qualifying test that has been approved by the superintendent if secondary school not completed or
- 3) A Canadian Adult Educational Credential (CAEC) issued by a Canadian Province or territory or a General Education Development (GED) Certificate from the United States
- 4) Must be Canadian citizens or Canadians residing outside of Canada, Naturalized Canadians or Canadian Permanent Residents. Students to provide proof of Canadian Citizenship or proof of Canadian Permanent Residency status.

In addition to completing the form above, please pick <u>one</u> 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: | Υ | N | |
|--|---|---|--|
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OPTION B

- A picture of yourself
- One to 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 to three minute monologue. Applicants are to upload the video to YouTube (make it private) and provide the URL link with your application. Student can also attach as an MP4 format to their email.

Provide the URL to your video here:



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PLEASE FILL OUT ALL INFORMATION

| SURNAME: | | | _ |
|---|-------------|---------|-------|
| FIRST NAME: | MR. | MRS. | MS. |
| AGE: | | 1411.0. | 1415. |
| 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): | | | |
| | | IP: | |
| EMERGENCY CONTACT (EVENING): | | IP: | |



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SELECT WHICH SEMESTER YOU WISH TO ATTEND

| JANUARY 13 | 2025 | | | |
|--|------------------------------|---------------|---|-------------------|
| MAY 5, 2025 | | | SEPTEMBER 2, 2025 | |
| Tuition: | \$7,800.00 C \$ 1,356.00C | | <u>s H</u> ST for four professionally ed | dited film scenes |
| TOTAL: | \$ 9,156.00 C | DN | | |
| To apply, send to: <u>admin@tor</u> | • | • • | and all required materials | |
| In Person: | 219 Dufferin S | treet, Studio | #1D, Toronto, Ontario, | |
| Regular Mail o | | | n Street, Unit #1D, Toronto O Imission Dept. | ntario, M6K 3J1 |



TORONTO ACADEMY OF ACTING FOR FILM & TELEVISION 219 DUFFERIN STREET, UNIT #1D, TORONTO, ONT. M6K 3JI 416-536-8574 FAX 416-536-0227

register@torontoacademyofacting.com

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 \$7,800.00 plus \$1,356.00 for four professionally edited film scenes for the students demo reel. Student who accepts the enrollment contract must sign the enrollment contract

| 10 days of receipt of the enrollment co first day of training, together with the | ether with their placement fee of \$500.00 to the Academy within ontract. Original signed copy is to be brought to administration balance of the tuition fee as well as the additional fee for edited on fee, and fee for editing can be paid by way of money order, fer. | | | | |
|--|---|--|--|--|--|
| 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 | | | | |
| register@torontoacademyofacting.com Academy has auto deposit. If paying Foronto, Ontario, M6K 3J1 Please not If the Student is processing payment of VISA MASTERO Credit Card V/M/ Expiry Date | | | | | |
| Card Holder's Name(or 3 digit Security Code (or hereby authorize the Toronto Acaden Credit card no. for the above amount | | | | | |
| Signature of Cardholder | | | | | |
| Student will require housing if accepted | d into the program YES NO | | | | |