



**Faculty of Education and Arts  
Regional Language Center**

**Application for Admission**

All applicants must complete the application form and submit it along with the appropriate application credentials listed below to the:

**The Office of Admissions  
University of Belize  
Hummingbird Avenue  
P.O. Box 340  
Belmopan, Cayo District, Belize, Central America**

**Application Criteria**

1. Application fee of BZ\$30.00 or US\$15.00
2. One (1) Official or certified copy of transcript from at least a secondary school
3. One (1) Official or certified copy of diploma/certificate to prove completion of secondary education
4. One (1) copy of a valid ID with photo (only for Belizeans)
5. One (1) copy of a valid passport (only for foreigners)
6. One (1) letter of recommendation with firsthand knowledge of your academic abilities
7. One (1) coloured passport-size photograph

**Please note that you will be required to take a placement exam**

**Biographical Information**

1. Name(s): \_\_\_\_\_

Last name(s): \_\_\_\_\_

2. Date of Birth: \_\_\_\_\_ 3. Gender: \_\_\_\_\_ 4. Marital Status: \_\_\_\_\_  
Month / Day / Year

5. Country of Birth: \_\_\_\_\_ 6. Nationality: \_\_\_\_\_

7. Present Address: \_\_\_\_\_

Receipt # \_\_\_\_\_

8. Email Address: \_\_\_\_\_

9. Phone Number

Cellular: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_

### **Emergency Contact Information**

Please complete the following information for two different emergency contacts:

<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Spouse	<input type="checkbox"/> Other: _____
Name(s): _____		Last name(s): _____	
Address: _____			
_____			
Phone Number			
Cellular: _____		Home: _____ Work: _____	

<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Spouse	<input type="checkbox"/> Other: _____
Name(s): _____		Last name(s): _____	
Address: _____			
_____			
Phone Number			
Cellular: _____		Home: _____ Work: _____	

### **Academic Data**

Name of Institutions	Certification	From	To	Remarks

### **Other qualifications**

Qualifications	Certification	Year

### Languages

Language	Conversation Level	Reading Level	Writing Level

Academic Program that you are applying for:

1.  **Certificate in English as a Second Language (CESL) - August to June**
  
2.  **Customised Language Courses**
  - English
  - Spanish
  - Mandarin
  - Creole
  - Garifuna

I certify all statements given in this application are true and accurate to the best of my knowledge. I agree to abide by the rules and regulations of the Regional Language Center (RLC) and to the University of Belize (UB). I understand that the institution has the authority to verify school records submitted.

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**Date**