

Downtown campus 250 West Pender Vancouver, B.C. V6B 1S9 **Broadway campus** 1155 East Broadway Vancouver, B.C. V5T 4V5

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vcc.ca

Youth Train in Trades is a government-funded program providing both high school credits and a head start to completion of an apprenticeship program.

| 1. Personal information | | |
|--|--|------------------------------------|
| I already have a VCC student number: | If yes, please enter your number: | |
| | | Student ID |
| Last name (family name) | First name | |
| Address | | |
| City | Province Postal code | |
| Phone | Email | |
| 2. Citizenship | | |
| Gender: 🗖 Female 🗖 Male 🗖 Other | Are you a Canadian citizen? | □ No |
| Birthdate (DD/MM/YYYY) | Birth country | |
| Citizenship country | Native language | |
| Your status and citizenship/visa or Permanent Resident identification number | Issue date (DD/MM/YY) | Expiry date (DD/MM/YY) |
| 3. Indigenous Students | | |
| Do you identify yourself as a Canadian Indigenous person? Yes No Yes, select one or more option that best describes your Indigenous identity: | ☐ First Nations (Status or non-Status) | ☐ Métis ☐ Inuit ☐ Indigenous |
| Your Nation: | ☐ Please contact me regarding Aboric | ginal student support and services |
| 4. Emergency Contact Information | | |
| | | |
| Name | Relationship to you | |
| Email | Phone | |
| 5. Declaration (mandatory) | | |
| I understand that submission of this application does not guarantee admiss entrance requirements and space availability. I agree to a bide by the rules and regulations of VCC as published on the VCC. | | , |

- registered and any changes which may be made while I am a student at VCC.
- 3. I certify that the information I have provided in this application is complete and accurate and may be verified by VCC. I understand that falsifying any documents or information submitted will result in immediate cancellation of my admission or registration at VCC.

 4. I have read and understand the VCC Protection of Privacy disclaimer on the back of this form.
- 5. I understand that VCC will be sending communications in electronic format to my email.

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| 6. Program info | ormation | | | | | |
|--|---|---|--|--|--|--|
| I am applying for admission to: | | | ☐ Baking Fo | oundation | | |
| ☐ Auto Collision and Refinishing | g Foundation | | ☐ Hairstylist | t Foundation – On-sit | :e | |
| ☐ Auto Collision and Refinishing | g Foundation- High Schoo | ol on-site | ☐ Hairstylist | t Foundation – Off-sit | te High School Learning | (Maple Ridge) |
| ☐ Auto Collision and Refinishing | g- High School - Flex learr | ning | ☐ Heavy Me | echanical Trades Four | ndation | |
| ☐ Auto Service Tech Level 1 – F | oundation | | ☐ Profession | nal Cook | | |
| ☐ Auto Service Tech Level 1 - Br | ritannia Secondary Schoo | d | Other | | | |
| Preferred start date (subject to wa | aitlist): | | | | | |
| 7. Educational | history | | | | | |
| BC examination or PEN number (F | Personal Education Numb | per) if known: | | | | |
| Last high school attended | City | | | ended (MM/YY) | | mpleted (10, 11, 12) |
| 8. Support for | students wi | ith disabili | ties | | | |
| Do you require additional suppor | t services due to a disabi | lity or medical conditio | n? (optional) | ☐ Yes ☐ No ☐ | J Not specified | |
| To support you during your studies at the Student Development Recep | | | | | | |
| 9. Protection o | f privacy | | | | | |
| Vancouver Community College (VCC) or and graduate students, record academic mandate of the College. Information on secondary educational institutions, the placed into the student record will be co (R.S.B.C. 1996, c. 165). In addition to col Vancouver Community College (SUVCC) you have any questions about its collect please contact the Registrar's Office, Vancouver Community College (SUVCC) | ic achievement, issue library can admission, registration and a Industry Training Authority and ollected, protected, used, disc Ilecting personal information for the SUVCC uses this information, use and disclosure of the | ards, administer and opera cademic achievement may d the provincial governmer closed and retained in com for its own purposes the Co lation for the purpose of stu- information. If you have an | te academic, alu also be disclose nt. Personal infor pliance with Briti bllege collects sp udent elections a ny questions abou | umni and other College pied and used for statistical rmation provided for admish Columbia's Freedom opecific and limited personand the Student Health arut the collection, use and | rograms and other purposes and research purposes by the hission and registration and of Information and Protection hal information on behalf of the nd Dental Plan. Please contact disclosure of your personal | s consistent with the he College, other post any other information on of Privacy Act the Students' Union of act the SUVCC office if |
| 10. Consent to re | elease perso | nal informa | tion to | your scho | ol district (m | andatory) |
| I agree, by signing this form, to al until the completion of my studies | - | | | • | or academic history star | ting from today |
| School District | | Się | gnature | | | |
| 11. Consent to r | elease pers | onal infor | matior | 1 (optional) | | |
| I agree, by signing this form, to al academic history starting from to | | | | | | |
| Name/Organization | | R∈ | elationship to y | you | | |
| Date | | Si | gnature | | | |
| 12. Consent to | invoice (comp | leted by school | district) | | | |
| Vancouver Community College is (STBC). Students may also be req bookstore at vcc.ca/bookstore . S | uired to purchase supplie | es such as textbooks, ki | | | | |
| School District | | Siş | gnature | | | |