



### 3. Educational history

PEN number (Personal Education Number) if known:

If you are a B.C. resident and cannot find or do not know your PEN then visit [bc.edu.gov.bc.ca/pen/student/penobtain.htm](http://bc.edu.gov.bc.ca/pen/student/penobtain.htm)

Have you graduated from high school (secondary, GED) in any country?  Yes  No If yes, please indicate the country: .....

#### High schools you have attended

Name up to two (2) entries – most recent first

Name of school	Province, Country	DD/MM/YYYY	DD/MM/YYYY	<input type="checkbox"/> Less than 12 <input type="checkbox"/> 12 or equivalent <input type="checkbox"/> IB diploma
Name of school	Province, Country	DD/MM/YYYY	DD/MM/YYYY	<input type="checkbox"/> Less than 12 <input type="checkbox"/> 12 or equivalent <input type="checkbox"/> IB diploma

#### Post-secondary institutions you have attended

Name up to three (3) entries – most recent first

Name of institution	Province, Country	DD/MM/YYYY	DD/MM/YYYY	Credential awarded	DD/MM/YYYY
Name of institution	Province, Country	DD/MM/YYYY	DD/MM/YYYY	Credential awarded	DD/MM/YYYY
Name of institution	Province, Country	DD/MM/YYYY	DD/MM/YYYY	Credential awarded	DD/MM/YYYY

### 4. Release of information (optional)

I hereby authorize Vancouver Community College (VCC) to release any of the following items: Application information, Admission status, Letter of acceptance, Transcripts, Progress and Attendance records (if applicable) to:

- Agency (name of agent)
- Relative / Friend (name)
- Other Educational Institution (name)
- Applicant's Signature

### 5. Payment

A non-refundable application fee **must be submitted with this form**. Applications received without the application fee will not be processed. A service charge for NSF or returned cheques will be assessed.

### 6. Support for students with disabilities

Do you require additional support services due to a disability or medical condition?  Yes  No  Not specified

To support you during your studies at VCC, please contact Disability Services at: 604.871.7000, option 2, Email: [disabilityservices@vcc.ca](mailto:disabilityservices@vcc.ca) or in person at either campuses to arrange an intake appointment.

### Protection of privacy

Vancouver Community College (VCC) collects and retains student personal information under the authority of the College and Institute Act. The information will be used to admit, register and graduate students, record academic achievement, issue library cards, administer and operate academic, alumni and other College programs and other purposes consistent with the mandate of the College. Information on admission, registration and academic achievement may also be disclosed and used for statistical and research purposes by the College, other post secondary educational institutions, the Industry Training Authority and the provincial government. Personal information provided for admission and registration and any other information placed into the student record will be collected, protected, used, disclosed and retained in compliance with British Columbia's Freedom of Information and Protection of Privacy Act (R.S.B.C. 1996, c. 165). In addition to collecting personal information for its own purposes the College collects specific and limited personal information on behalf of the Students' Union of Vancouver Community College (SUVCC). The SUVCC uses this information for the purpose of student elections and the Student Health and Dental Plan. Please contact the SUVCC office if you have any questions about its collection, use and disclosure of the information. If you have any questions about the collection, use and disclosure of your personal information by VCC, please contact the Registrar's Office, Vancouver Community College, 1155 East Broadway, Vancouver, B.C. V5T 4V5; 604.871.7000, option 4.

### 7. Declaration

1. I understand that submission of this application does not guarantee admission to a program or course, and that admission is subject to meeting VCC's entrance requirements and space availability.
2. I agree to abide by the rules and regulations of VCC as published on the VCC website, and those of the department and program in which I shall be 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.

Signature \_\_\_\_\_ Date \_\_\_\_\_