

Application for Admission

Broadway campus 1155 East Broadway, Vancouver, B.C. V5T 4V5 p: 604.871.7000, **f**: 604.871.7458

250 West Pender St., Vancouver, B.C. V6B 1S9 p: 604.871.7000, **f**: 604.443.8450

Toll free: 866.565.7820 www.**VCC.CA**

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Canadian citizens and permanent residents only. To learn more about application dates, check vcc.ca.

You must submit a non-refundable application fee with this form. Please print in legible letters.

I already have a VCC student number: \square Yes \square No	If yes, please e	nter your number:							
1. Personal information									
All official VCC correspondence will be mailed and/or emailed to the address VCC cannot be held responsible for misdirected mail.	supplied on this forn	n.		·	Stude	nt ID	·		
Legal last name (family name)	Legal first name						• • • • • •		
Middle name(s)	Preferred first name	Previous last name (if applicable)							
Address				• • • • • • •			• • • • • •	• • • • •	
City	Province	Postal code	Count	ry			• • • • • •	• • • • •	
Home phone	Mobile phone		Other	phone	e		• • • • • •	• • • • •	
Email	Birthdate (DD/MM/YYYY) Social insurance number							• • • • •	
Gender: ☐ Woman ☐ Man ☐ Non-binary ☐ Prefer not to answer	Are you a Canadian citizen?								
Your status and citizenship/visa or Permanent Resident identification number	Issue date (DD/MM	l/YY) Expiry date ((DD/MM	/YY)		• • • • • • •	• • • • • •	• • • • •	
Birth country	Citizenship country	First languag	ge			• • • • • • •		• • • • •	
Aboriginal students > Do you ide	ntify yourself as a Ca	nadian Aboriginal /Ind	igenous	perso	n? 🗖	Yes	□ No)	
If yes, select one or more option that best describes your Aboriginal identity:	☐ First Nations (St	atus or non-Status) 〔	□ Métis		nuit				
Your Nation:	☐ Please contact n	ne regarding Aborigina	al studen	t supp	ort an	d servi	ices.		
Former Youth in Care > VCC offers	s the provincial Youth	in Care tuition waiver	program	to eli	gible s	tudent	is.		
Have you lived as a Youth in Care in B.C. for a minimum of 24 months?									
Emergency contact									
Name	Relationship to you								
Email	Phone					• • • • • • • •	• • • • • •	• • • • •	
2. Program information									
I am applying for admission to:									
gram name Preferred start date (subject to waitlist)								• • • • •	

All programs with entrance requirements must have official transcripts and supporting documents attached to this application form. Proof of name change is required

if documents submitted are in a different name. All documents submitted become property of VCC.

3. Educationa	l 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 bced.gov.bc.ca/pen/student/penobtain.htm						
Have you graduated from hig	gh school (secondary, GED) in a	iny country? 🗖 Yes 🗖 No	If yes, please indicate	e the country:		
High schools you	have attended					
Name up to two (2) entries –	most recent first					
Name of school	Province, Country	DD/MM/YYYY Start date	DD/MM/YYYY Date completed	☐ Less than 12 ☐ 12 or equivalent ☐ IB diploma Current or completed grade		
Name of school	Province, Country	DD/MM/YYYY Start date	DD/MM/YYYY Date completed	☐ Less than 12 ☐ 12 or equivalent ☐ IB diploma Current or completed grade		
Post-secondary in	nstitutions you have	attended				
Name up to three (3) entries						
Name of instutition	Province, Country	DD/MM/YYYY Start date	DD/MM/YYYY Date completed	Credential awarded	DD/MM/YYYY Date awarded	
Name of instutition	Province, Country	DD/MM/YYYY Start date	DD/MM/YYYY Date completed	Credential awarded	DD/MM/YYYY Date awarded	
	,		DD/MM/YYYY			
Name of instutition	Province, Country	Start date	Date completed	Credential awarded	Date awarded	
	r Community College (VCC) to gress and Attendance records	(if applicable) to:	tive / Friend (name)	ormation, Admission status	s, Letter of	
☐ Other Educational Institut	□ Other Educational Institution (name) Applicant's Signature					
5. Payment						
A non-refundable application	n fee or valid fee waiver must ut the application fee will not k			cheques will be assessed.		
	r students with					
•	pport services due to a disabi studies at VCC, please contact	_		•	ca or in porcen at	
either campuses to arrange a	•	Disability Services at. 604.6	71.7000, Option 2, Line	iii. disabiiitysei vices@vcc.c	a or in person at	
Protection of	privacy					
students, record academic achievement Information on admission, registration Training Authority and the provincial gdisclosed and retained in compliance College collects specific and limited p	collects and retains student personal in ent, issue library cards, administer and cand academic achievement may also be government. Personal information provice with British Columbia's Freedom of Infor ersonal information on behalf of the Stu- lease contact the SUVCC office if you ha	operate academic, alumni and other e disclosed and used for statistical and led for admission and registration and mation and Protection of Privacy Act dents' Union of Vancouver Communit	College programs and other pid I research purposes by the Coll I any other information placed i (R.S.B.C. 1996, c. 165). In additi y College (SUVCC). The SUVCC	urposes consistent with the manda lege, other post secondary education nto the student record will be colle on to collecting personal information uses this information for the purpo	te of the College. onal institutions, the Industry cted, protected, used, on for its own purposes the use of student elections and	
	n by VCC, please contact the Registrar's	Office, Vancouver Community Collec	e, 1155 East Broadway, Vancou	iver, B.C. V5T 4V5; 604.871.7000, օր	otion 4.	
7. Declaration		mission to a program or accuracy and	that admission is subject to m	nacting VCC's antropos requirem	anta and anasa availability	
 I agree to abide by the rules and r while I am a student at VCC. I certify that the information I have in immediate cancellation of my a I have read and understand the VC 	his application does not guarantee ad regulations of VCC as published on the e provided in this application is compl admission or registration at VCC. CC Protection of Privacy disclaimer on ding communications in electronic for	VCC website, and those of the depeter and accurate and may be verified the back of this form.	artment and program in whic	h I shall be registered and any cha	anges which may be made	

Date

Signature