



### 3. Course selection

Complete this section if you want to take courses. If you want to complete a program, leave the course selection blank.

Term	Course Number and Title (e.g. PIDP 3260 Professional Practice)	Course Reference Number (CRN) (if known)

### 4. Acknowledgement and Agreement

I acknowledge and agree that:

- I am only entitled to benefit from StrongerBC future skills grant (FSG) funding to a maximum lifetime amount of \$3,500.
- I am responsible for paying back any amount of StrongerBC future skills grant (FSG) funding that has been provided in excess of this amount.
- I am not receiving duplicative funding for this program, and I am not receiving funding from Student Aid BC for this course(s) or program.
- I understand that if I am receiving any federal or provincial benefit (such as Employment Insurance or BC Employment and Assistance), I must seek approval from the appropriate government body before participating in a program.
- I understand that the StrongerBC future skills grant (FSG) benefits may have tax implications. I will consult the Canada Revenue Agency (CRA) for tax advice.
- If I am a current WorkBC Employment Services client, I will work with my employment counsellor before I register with a public post-secondary institution.
- I understand that if I require additional financial supports like living supports or daycare to attend training, I can contact my local WorkBC Centre 6-8 weeks in advance to determine if I am eligible.
- The amount of StrongerBC future skills grant (FSG) funding that I have benefited from is subject to review and audit.

### 5. 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 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.

### 6. 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