

Date: _____

APPLICATION FORM

Applicant Name:		Birthdate (MM/DD/YY):	
Contact Person:			
Contact's Role (e.g. parent, advocate, school staff, support worker, etc.):			
Address:			
Street Address			Apartment/Unit #
City		Province	Postal Code
Home Phone:	()	Alternate Phone:	()
E-mail Address:			

POST-SECONDARY INFORMATION

Vancouver:	<input type="checkbox"/> UBC (Vancouver)	<input type="checkbox"/> Emily Carr	<input type="checkbox"/> SFU
Okanagan:	<input type="checkbox"/> UBCO (Okanagan)	<input type="checkbox"/> NVIT (Merritt)	
Vancouver Island:	<input type="checkbox"/> UVic		
Other (please specify):			
What do you think you might want to study?			
Anticipated Start Date:			

EDUCATIONAL HISTORY

High School Attended:
City/Province:
Last Grade Attended:
Favourite Courses or Activities in High School:

Top 3 areas of study you are most interested in studying at college/university:
1.
2.
3.
Hobbies or interests that you would like support in doing on/off campus:
Any other information you would like us to know about you:

Important Note: Students are responsible for the cost of tuition at their post-secondary institution, a local campus inclusion facilitator can provide you with an estimated cost per term and discuss bursary options.

Please return your completed application form to the local campus Inclusion Facilitator

Up to date contact information is available on our website:

<http://www.bc-ipse.org/staff-directory.html>