



APPLICATION FOR ADMISSION

nvit.ca



MERRITT CAMPUS:

4155 Belshaw Street
Merritt, BC V1K 1R1
Phone: 1-250-378-3300
Toll Free: 1-877-682-3300

VANCOUVER CAMPUS:

200-4355 Mathissi Place
Burnaby, BC V5G 4S8
Phone: 1-604-602-9555
Toll Free: 1-877-682-3300

INSTRUCTIONS

1. Fill out this form completely and be sure to sign it. Mark sections that are not applicable with N/A. If you have questions regarding how to complete this form please contact the Registrar's Office or email info@nvit.ca.
Review Dates* are set for the Fall (September) term as the end of July of each year.
Review Dates* are set for the Spring (January) term at the end of November of each year.
Seats will be offered to qualified applicants in the order applications are completed (all required documents and assessments are received).
** Applications will be accepted after these dates if there are still seats available, but applications submitted before the deadline will be given priority and we cannot guarantee late applications will be evaluated in time for the start of term.*
2. Arrange to have official transcripts sent directly to NVIT from your high school and any post-secondary institutions you have attended. Unofficial copies of transcripts may be provided for faster evaluation of an application, but official transcripts are required to finalize offers of admission. High school transcripts may be ordered directly from your high school or the Ministry of Education (contact the Ministry at 250-356-2432 or visit <https://www2.gov.bc.ca/gov/content/education-training/k-12/support/transcripts-and-certificates>).
3. Mail or drop off your application to the Registrar's Office. Students may be able to email their applications to info@nvit.ca.
4. If you will not be available while this application is being evaluated, or to register, and wish to have someone else act on your behalf, please submit a signed Release Form to the Registrar's Office. The Release Form is available on our website at www.nvit.ca.
5. If your address or contact information changes, inform the Registrar's Office in writing so we can continue to contact you about your application.

PERSONAL INFORMATION

Have you attended NVIT before: No Yes If yes, previous Student Number: _____

Name: _____ (LAST) _____ (FIRST) _____ (MIDDLE)

Current Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone: (Home) _____ (Work) _____ (Cell) _____

Gender: M F Non-Binary I choose not to answer Pronouns: She He They Ze Name

Birthdate (DD/MM/YY): ___ / ___ / ___ Citizenship: Canadian Permanent Resident Student Visa Other

Previous/Maiden Name: _____

Email Address: _____

Note: You will be assigned an NVIT email address. Format will be: your Student ID # followed by @nvit.ca. Example: n1234567@nvit.ca

PEN (Personal Education Number): _____

Assigned to all BC High School students

OFFICE USE ONLY

Program: _____

Entered By: _____

VOLUNTARY DISCLOSURE

Are you of Indigenous Ancestry? No Yes

If yes, your Band or Nation: _____

Province: _____

Check applicable box: Status Non Status Métis Inuit

Do you have a disability? No Yes If yes, do you wish to be contacted by an Academic Advisor? No Yes

EMERGENCY CONTACT INFORMATION

Emergency contact name: _____ Emergency contact phone: _____

Relationship to You: _____

APPLICATION INFORMATION

Before completing this section, refer to the current NVIT program calendar or NVIT website at www.nvit.ca for information on programs available at NVIT. If you are unclear about which program to apply for, contact the Registrar's office at 250-378-3300.

Start Term: (Circle One) Fall (Sep-Dec) Spring (Jan-Apr) Summer (May-Aug) Year: _____

Name of program: _____

Are you planning to attend: Full-Time Part-Time

Please indicate where you would like to start your classes: Merritt Vancouver Community: _____

Do you require a student housing application? (Available at Merritt campus only) Yes No (Please specify)

Do you require a Daycare Application? (Available at Merritt campus only) Yes No

HIGH SCHOOL INFORMATION

Note: Official high school transcripts must be forwarded from the high school or Ministry for admission to be granted.

Name of High School: _____

City/Town: _____ Province: _____ Last year attended: _____

Did you graduate: No Yes If yes, Graduation Year: _____

POST-SECONDARY EDUCATION

Note: Official post-secondary transcripts must be forwarded from the institution for transfer credit/admissions to be awarded.

UNIVERSITY OR COLLEGE	FROM (YEAR/MONTH)	TO (YEAR/MONTH)	PROGRAM

DECLARATION

Applicant Declaration: I declare that the information I have submitted in this application is complete and correct. Omission of information or falsification of any document submitted may result in the immediate cancellation of admission or registration. Completion of this application permits the Institute to request and/ or confirm any information necessary to support my application for admission.

Information Release: I understand that the information provided in this application, as well as other information contained in a student record, is collected under the authority of the College and Institute Act. All information contained in student records will be protected and used in compliance with the B.C. Freedom of Information and Protection of Privacy Act (1996). It may be used for internal administration of admission, registration, grade notification, income tax receipts, awards, institutional research, planning, and other fundamental activities related to being a member of the Nicola Valley Institute of Technology community and attending a public post-secondary institution in B.C.

Limitations of the Application: I understand that this application is a request for admission, and does not guarantee admission to any program or course. Admission is subject to provision of all requested documents and assessments, completion of admission requirements, and space availability. If admitted, I agree to abide by the established rules and regulations of Nicola Valley Institute of Technology, including those of the program in which I shall be registered.

Signature: _____ Date: _____