

STUDY ABROAD ADMISSION REQUEST

International Student Centre

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Building SW01-1170

Instructions: 1) Save this PDF to your desktop, 2) Open with Adobe Reader or Adobe Acrobat, 3) Complete all required fields, 4) Save, 5) Close PDF then re-open to ensure the content you filled in has saved, 6) Submit to BCIT.

Fields marked with an asterisk (*) are mandatory.

Email this form to Admissions@bcit.ca with the subject line Study Abroad.

PERSONAL INFORMATION

Legal First Name (given name)*	Middle Name		Legal Last Name (family name)*
Gender*		Birth Date (DD-MMM-YYYY)*	
☐ Male ☐ Female			
CONTACT INFORMATION			Please provide at least one phone number*
Mailing Address (number and street)*			Home Phone Number
City*	Province	Postal Code*	Mobile Phone Number
Country*	Personal (non-BCIT) Email Address*		
CITIZENSHIP / LANGUAGE			
Status in Canada:*	Country of Citizenship*		
☐ Canadian citizen			
☐ Diplomat or diplomat dependent	O		
Live-in caregiver work permit	Country of Birth*		
Non-Canadian – distance/online			
Permanent resident	Is English your primary language?*		
Refugee – claimant			
Study permit	☐ Yes ☐ No		
Visitor or visitor visa			
☐ Work permit			