

Your BCIT ID Number

PRE-ENTRY ASSESSMENT ADVANCE GAS TURBINE, INDUSTRY PARTNERSHIP CERTIFICATE

Legal Last Name (family name)

Aerospace Technology Campus 3800 Cessna Drive, Richmond, BC, Canada

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.

Legal First Name (given name)

AO			
Graduates of the BCIT Certificate in Aircraft Gas	Turbine Technician:		
■ You are exempt from the pre-entry assessm	ent, English, math and industry partner require	ements.	
■ Please proceed directly to the "Apply to Pro	ogram" section and submit your application.		
When completing your application online, e partner requirements.	nter "BCIT Certificate in Aircraft Gas Turbine To	echnician" for the English, math and industry	
This pre-entry assessment is a requirement for constitute acceptance into the program.	Advanced Gas Turbine, Industry Partnership C	ertificate. This pre-assessment does not	
The department will evaluate and send this info other requirements needed for entry. Please us		n needed and feedback on any upgrading or	
When you decide to apply, you must save this for documentation and requirements. NO fee is characteristics.		our online application with any supporting	
Complete this form and save it as a pdf and email it to: GasTurbineTech@bcit.ca			
REASONS FOR SELECTING PROGRAM			
In your own words, briefly state your reasons for selec	ting this program and what skills you expect to gain l	by completing this program.	
DEDCOMAL CEDENCELIC			
PERSONAL STRENGTHS Briefly describe up to 3 personal strengths that will he	No you excel in this program (examples, mechanical	experience, working with tools, interest in	
technology, knowing how things work etc.).	sip you excer in this program (examples, mechanical	experience, working with tools, interest in	

CAREER OBJECTIVES Briefly describe your career goals upon completion of this program: YEARS OF WORK EXPERIENCE				
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How many years of work experience do you have in general? How many years of volunteer experience do you have?				
□ <1 year □ 1-2 years □ 3-4 years □ 5-10 years □ 10+ years □ -1 year □ 1-2 years □ 3-4 years □ 3-4 years □ 5-10 years □ 10+ years				
WORK AND VOLUNTEER EXPERIENCE				
Select the statement that best describes your work and volunteer experience				
Less than 1 year; combination of full-time and part-time or all part-time				
☐ 1−2 years experience; combination of full-time and part-time or all part-time				
1—2 years experience; combination of full-time and part-time or all part-time 3—4 years experience; mostly full-time				
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Additional work experience. Specify th	e roles and responsibilities.			
DEDSONAL INTEDESTS / EVT	DA CUIDDICUI AD ACTIVITIES AND HODDIES			
PERSONAL INTERESTS / EXTRA-CURRICULAR ACTIVITIES AND HOBBIES Do you participate in any extra-curricular activities (now or in the past)? (e.g. volunteering, clubs, sports, motorized power sports, community involvement)				
		er sports, community involvement)		
OUTSTANDING ACCOMPLISHMENTS				
DEPARTMENT USE ONLY				
Recommended to apply Yes No	Completed By	Date (DD/MMM/YYYY)		
PRIVACY NOTICE BCIT collects personal information that you chose to provide through this questionnaire under the authority of section 26 of the Freedom of Information and Protection of Privacy Act (RSBC. 1996, c. 165) and the College and Institute Act, (RSBC. 1996, c.52). Your personal information is used to assess your eligibility for admission, registration, decisions on your academic status and for other BCIT purposes that are directly related and consistent with BCIT's mandate and its programs and the administration and operation of BCIT pursuant to the College and Institute Act and other applicable legislation. Some of this personal information may also be disclosed to the BCIT Student Association, the BCIT Alumni Association and the BCIT Foundation. For individuals who are granted awards, BCIT release personal information to award donors and funding agencies. Information on admission, enrollment and academic achievement is disclosed and used for statistical and program research and evaluation purposes by BCIT, other post-secondary educational institutions (in such cases, individual identities are not disclosed) and as required by provincial and federal government authorities or authorized by law.				
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Questions about the collection, use and disclosure of personal information by BCIT may be directed to the Associate Director, Privacy, 3700 Willingdon Ave., Burnaby, BC V5A 3H2; Tel: 604.432.8508, email: Cynthia_Kent@bcit.ca

By completing and submitting this questionnaire with your application for admission to BCIT, you consent to the collection, use and disclosure of your personal information as described above.