

Your BCIT ID Number

Α0

ALTERNATE ENTRY APPLICANT QUESTIONNAIRE ADVANCED DIPLOMA IN SUSTAINABLE BUSINESS LEADERSHIP

Legal Last Name (family name)

Admissions

3700 Willingdon Avenue, Burnaby, BC, Canada V5G 3H2

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.

■ This form is a program entrance requirement for Alternate Entry. Submission with your application is mandatory for Alternate Entry.

Legal First Name (given name)

You must save this form to your computer and upload the completed and signed (see below) version to your online application.				
■ The program area will evaluate yo	our answers; please write in complete se	ntences (rather than point form).		
EDUCATION OBJECTIVES				
What are your objectives for pursuing this	program?			
WORK AND VOLUNTEER EXPERIENCE				
Please describe you experience below:		T		
POSITION 1	Start Date	End Date		
Type of Position (choose one)	Position Title	Company Name		
(choose one)	r osition ritte	Company Name		
	City	Province		
Main responsibilities of this position				
1.				
2.				
3.				
Main skills and abilities required in this po	sition			
1.				
2.				
3.				
NDM 09 V1 (2021,05)				

How is this experience relevant to this program of stu	udy?				
POSITION 2	Start Date	End Date			
Type of Position	otali bata				
(choose one)	Position Title	Company Name			
	City	Province			
Main responsibilities of this position					
1.					
2.					
3. Main skills and abilities required in this position					
1.					
2.					
3.					
How is this experience relevant to this program of study?					
POSITION 3	Start Date	End Date			
Type of Position					
(choose one)	Position Title	Company Name			
	City	Province			
	City	Fromice			
Main responsibilities of this position					
1.					
2.					
3.					
Main skills and abilities required in this position					
1.					
2.					
3. How is this experience relevant to this program of stu	udv?				
Tion is this experience relevant to this program or study.					

POST-SECONDARY EDUCATION Have you completed any post-secondary education or training? \qed Yes □ No If yes, briefly describe: RELEVANT WORKPLACE TRAINING Have you done any workplace training relevant to this program? □ Yes If yes, briefly describe: PERSONAL INTERESTS / EXTRA-CURRICULAR ACTIVITIES Do you participate in any extra-curricular activities (now or in the past)? (e.g. volunteering, clubs, community involvement) As a participant ☐ Yes □ No If yes, briefly describe: As a leader ☐ Yes □ No If yes, briefly describe: **SPECIAL AWARDS AND CITATIONS** Have you received any special awards or recognition for your accomplishments? ☐ Yes □ No If yes, list here:

ADDITIONAL INFORMATION				
Briefly discuss any additional information you feel is important for the Admissions Committee to know in considering your application.				
TO BE COMPLETED BY PROGRAM HEAD/ASSOCIATE DEAN				
I approve this application	Name	Signature		

□ Yes

□ No