



MANDATORY APPLICANT QUESTIONNAIRE DIAGNOSTIC MEDICAL SONOGRAPHY

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.

Student Name	Student ID Number AO
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- > This form is a program entrance requirement and submission with your application is mandatory.
- > You must save this form to your computer and upload the completed version to your online application.
- > The program area will evaluate your answers; please use proper English, grammar and punctuation.

PROGRAM OPTION

If you do not get a seat in the option you are applying to, would you like to be considered for a different option if space is available?

If yes, enter program option(s) in order of preference. The three options are: General Sonography Option, Cardiac Sonography Option, or General and Cardiac Sonography Option.

If no, enter "No" (200 character limit)

REASONS FOR SELECTING PROGRAM

There are many healthcare careers to choose from; why is sonography the right choice for you? What are your motivations for applying to this program?

PERSONAL STRENGTHS

Describe the skills and aptitudes you possess, and how they will contribute to your success in the program and profession.

VOLUNTEER AND OTHER EXPERIENCE

Provide details of your volunteer experience and extracurricular interests and how they correlate with your potential success. Include dates and time commitments.

WORK EXPERIENCE

Describe your work history and how it has helped you prepare for a career in sonography. Provide dates and details of your time commitment.

ACADEMIC OR COURSE WORK

Describe your post-secondary education experience. (Supporting transcripts must be uploaded to your application.)