



# SPECIFIC COURSE COMPLETION CONTRACT

## Student Financial Aid and Awards

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

E [finaid@bcit.ca](mailto:finaid@bcit.ca) T 604.432.8555 F 604.454.0941

Building SW1-2132

**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) Print form and sign, 7) Submit to BCIT by email, fax or drop off in person.

This form is required for students taking a full-time course load comprised of part-time studies courses, who wish to apply for student assistance or interest-free status for student loans.

Responsibilities of the applicant:

- Submit this fully completed form to BCIT Student Financial Aid and Awards.
- Be accepted into an eligible BCIT program and have received program approval. To submit an online program declaration request go to your myBCIT account at [my.bcit.ca/cp/home/displaylogin](http://my.bcit.ca/cp/home/displaylogin)
  - Click on Student Self Service and at the top of page choose the Admission tab.
  - Under the Declare section click on Declare a part-time studies program and follow the prompts to submit application.
- Chosen program of study must be recognized as eligible for financial assistance by StudentAidBC.
- Only approved courses required for completion of your credential can be included in your application for assistance.
- Your study period must be a minimum of 12 continual weeks in length (from the calendar week in which the first class begins to the calendar week during which final exams occur).
- Course load must be minimum required for full-time StudentAidBC eligibility as set out in the following table:

To check current course availability, and course details, consult the BCIT Part-time studies flyer, on-line at [bcit.ca](http://bcit.ca) or call Student Information and Enrolment Services at 604.434.1610.

Check for required textbooks for all your courses conveniently on-line at [bcit.ca/bookstore](http://bcit.ca/bookstore).

NO. OF ACTUAL WEEKS IN EACH TERM	MINIMUM CREDITS REQUIRED
12 – 15	12 credits
16 – 19	16 credits
20 – 25	20 credits
26 – 30	26 credits
31 – 38	31 credits
39 – 44	39 credits
45 – 52	45 credits



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Use this form for purposes of student assistance eligibility. Please see reverse for instructions.

Last Name	SABC Application No.	
First Name & Initial	BCIT Student No.	Social Insurance No.
BCIT Program Name		
Have you received acceptance into this program? <input type="checkbox"/> Yes <input type="checkbox"/> No (If no, see reverse side for instructions on how to apply.)		
Program Type/Year <input type="checkbox"/> Certificate      Diploma: <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> Advanced Diploma      Degree: <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th year		
Please check the circle that best describes your courses this term		
<input type="checkbox"/> Attending all classes on a BCIT campus <input type="checkbox"/> Combination of on-campus & Distance Education <input type="checkbox"/> Distance Education (correspondence/on-line)		

I, (student name) \_\_\_\_\_ agree to complete **all** course requirements in the following courses:

CRN #	Course Title	Subject Course #	Credits	Start Date			End Date			Tuition Fees	Mandatory Book Costs
				Month	Day	Year	Month	Day	Year		

between the study period of \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ and \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
Month Day Year Month Day Year

Total number of credits  Total number of calendar weeks

**In addition, I agree to the following terms and conditions:**

- I agree to immediately notify Student Financial Aid and Awards of any changes to my course load, including withdrawal, or changes to dates and/or credits.
- I am aware that I am required to complete all courses within the funding study period outlined above, and I agree to do so in order to qualify for student assistance as a full-time student, regardless of whether or not the academic term ordinarily allows for a longer course completion time.
- I understand that all courses must be part of a BCIT program that meets StudentAidBC eligibility requirements.
- I understand that if I do not attend and/or complete any or all of the above courses in the time frame outlined above, or if I re-register in a course in order to obtain an extension, I will be considered withdrawn from full-time studies

**I hereby declare that the information provided is correct and complete. Completion of this signed contract authorizes BCIT to confirm information necessary to support my application for student aid. I understand that BCIT has a right to cancel this application if the information contained in it has been misrepresented.**

Student Signature	Date
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