



CARDIOVASCULAR PRACTICUM CONFIRMATION AND ACCEPTANCE

BCIT Cardiac Sciences:

We wish to confirm that practicum site, \_\_\_\_\_  
will accept Ms./Mr. \_\_\_\_\_, applicant to the Cardiovascular Technology Program  
at BCIT, for a clinical practicum (5.5 months in duration) in the cardiovascular lab potential for the period of  
\_\_\_\_\_ to \_\_\_\_\_.

To maximize their learning and exposure, we assure that Ms./Mr. \_\_\_\_\_:

- Will be provided exposure to and learning opportunities that cover off and enhance competencies and skills as outlined in the Cardiovascular Technology program;
- Shall be given meaningful tasks, projects and work assignments that will utilize as well as enhance his/her competencies and skills outlined in the Cardiovascular Technology program

\_\_\_\_\_  
Signature of Authorized Signatory

\_\_\_\_\_  
Name and Designation

\_\_\_\_\_  
Date