



# VANCOUVER ISLAND UNIVERSITY

## Application for Admission

Online application available at [viu.ca/apply](https://viu.ca/apply)

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### Registration Centres

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**Nanaimo Campus**

900 Fifth Street  
Nanaimo, BC V9R 5S5  
Tel: 250.740.6400  
Toll-free: 1.888.920.2221  
[viu.ca](https://viu.ca)

**Cowichan Campus**

2011 University Way  
Duncan, BC V9L 0C7  
Tel: 250.746.3500  
[cc.viu.ca](https://cc.viu.ca)

**Parksville-Qualicum Centre**

100 Jensen Avenue E., Box 42  
Parksville, BC V9P 2G3  
Tel: 250.248.2096  
[viu.ca/parksville](https://viu.ca/parksville)

**Powell River Campus**

100 - 7085 Nootka Street  
Powell River, BC V8A 3C6  
Tel: 604.485.2878  
Toll-free: 1.877.888.8890  
[pr.viu.ca](https://pr.viu.ca)

Matter here | [viu.ca](https://viu.ca)



# APPLICATION FOR ADMISSION

Please ensure you print clearly and complete all sections of this application.

## OFFICE USE ONLY

Date Received:	Application fee received:	CPC:
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VIU Student Number (for returning Students)	Personal Education Number (current BC & Yukon High School Students)	Tradesperson ID Number
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## Personal Information

Legal First Name (no initials)	Middle Name(s) (no initials)	Last Name
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Maiden Name/Previous Name (if applicable)	Preferred Name
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Mailing Address	City
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Province	Postal Code	Country
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Telephone (Primary) (     )	Telephone (Other) (     )	Email
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Date of Birth year   month   day	Social Insurance Number (optional)	Gender Identity <input type="checkbox"/> Man <input type="checkbox"/> Woman <input type="checkbox"/> Non-binary
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Citizenship

Canadian

Permanent Resident (documentation required) Country of Citizenship \_\_\_\_\_

Refugee (documentation required) Country of Citizenship \_\_\_\_\_

## Emergency Contact

Name	Telephone (     )	Email
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Vancouver Island University is dedicated to supporting Aboriginal students in their efforts to achieve their goals. To assist us, please answer the following questions.

Do you identify yourself as an Aboriginal person of Canada, that is, First Nations, Metis, or Inuit?  Yes  No  I prefer not to answer this question

If you identify yourself as an Aboriginal person, are you (please check all that apply)  First Nations? (Status, Non-Status, Treaty, Non-Treaty)  Metis?  Inuit?

Vancouver Island University offers the Youth in Care Tuition Waiver Program to eligible students who have aged out of care in the British Columbia Care system as defined by the British Columbia Child, Family, and Community Services Act. For more information contact the Vancouver Island University Financial Aid department.

Have you lived as a Youth in Care in British Columbia for 12 months or more?  Yes  No  I prefer not to answer this question

Vancouver Island University would like to know if you are a "First Generation Learner."

- None of my parents attended university or college       Two of my parents attended university or college
- One of my parents attended university or college       I prefer not to answer this question

## Program Choice

Which program are you applying to?

Are you applying as a visiting student on a Letter of Permission?

Yes  No

Please indicate which VIU campus you would prefer to attend (one only).

- Nanaimo  Powell River  Cowichan  
 Parksville-Qualicum Centre  Other Location

Please indicate when you would prefer to begin your classes:

Month \_\_\_\_\_ Year \_\_\_\_\_

**Applicants to the Bachelors of Arts, Business Administration and Science programs, please specify your intended major.** *The information collected is for planning purposes only and does not guarantee access to any major.*

Intended Major \_\_\_\_\_

I have not decided on a Major

## Educational History Official transcripts must be submitted from all institutions – faxed, scanned or photocopied documents are not accepted.

Last High School Attended	Location	School District	Presently Attending?	Date Last Attended (year   month)	Did You Graduate?
			<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
Post-secondary Institutions Attended	Location	From (year   month)	To (year   month)	Program or Course	

### PLEASE READ THE FOLLOWING BEFORE SIGNING

#### COLLECTION, USE AND DISCLOSURE OF PERSONAL INFORMATION

The personal information on this form is collected under the authority of the University Act (RSBC 1996, ch.468). I understand that VIU will use and maintain the information for the purposes of admission, registration, student support services, research, administration and reporting requirements, alumni and development, administration of the Student Union Health and Dental plan, and other activities related to delivery of programs, courses, events and recreation by VIU. Note that in providing VIU with an email address you acknowledge that VIU may send confidential information about you to this address, consistent with Section 26 of the Freedom of Information and Protection of Privacy Act. VIU's administration calls for creating a digital photo image of each student that is used for purposes of validating the student as a member of the VIU community to gain access to campus services. The personal information will be used to verify the student Personal Education Number (PEN), required by the province of British Columbia, or to assign the PEN to students. The PEN is used to measure participation of the population in the post-secondary sector and for research and evaluation. For individuals admitted to a co-admission program with VIU partner institutions, I understand that all details of my application, studies, and student conduct record will be shared openly between VIU and the partner institution. For individuals granted awards, VIU releases personal information to award donors and provincial funding agencies. In addition, VIU uses the name of the award winners and/or photo images, municipality of residence, VIU program name, and the name or criteria of any award won in marketing materials for the purpose of publicizing VIU students, graduates, and their achievements. Student's names and contact information will also be shared with the VIU Students' Union. The use of this information will be in compliance with the Freedom of Information and Protection of Privacy Act. For questions about your personal information use, you may contact VIU's Director, Freedom of Information and Protection of Privacy at 900 Fifth Street, Nanaimo, BC, V9R 5S5, or telephone 250-740-6564.

#### APPLICANT STATEMENT

I certify that all statements on the application are true and complete. I understand that misrepresentation of this information in any material way may result in cancellation of my admission or registration status. I understand that submission of this application in no way guarantees admission to a program or course, and that admission is subject to meeting Vancouver Island University Program or Course prerequisites and space availability. I agree to abide by the rules and regulations of Vancouver Island University as published in the online official Calendar, and those of the department and program in which I shall be registered, and any changes which may be made while I am a student at the University.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_