

**PROGRAM APPLICATION FORM**

Have you taken a course at the JIBC before?										<input type="checkbox"/> Yes <input type="checkbox"/> No	
JIBC Student Number (if known)					Provincial Education Number (if known):						
* Legal Last name:					*Legal First name:					Middle name or Initial:	
Previous name used for Registration, if any:											
*Address:						*Email:					
*City:				*Province:				*Postal code:			
Evening or home phone:				*Day phone:				Cell phone:			
*Date of Birth: (mm / dd / yyyy)			*Gender:			<input type="checkbox"/> Male		<input type="checkbox"/> Female		<input type="checkbox"/> Transgender	
Are you of aboriginal heritage?			<input type="checkbox"/> Yes		<input type="checkbox"/> No						
If "Yes" are you:			<input type="checkbox"/> First Nations		<input type="checkbox"/> Inuit		<input type="checkbox"/> Metis				
Please indicate if you are:			<input type="checkbox"/> Status		<input type="checkbox"/> Non Status						
*Immigration Status:			<input type="checkbox"/> Canadian Citizen		<input type="checkbox"/> Permanent Resident (formerly called Landed Immigrant)						
			<input type="checkbox"/> If not Canadian citizen, please specify citizenship: _____								
			<input type="checkbox"/> Student Visa		<input type="checkbox"/> Other Visa						
<b>*Please select Program:</b>						<u>Cost:</u>					
Exterior Fire Fighter Operations (formerly "Basic Program")						<input type="checkbox"/>		\$75			
Interior Fire Fighter Operations (formerly "Fire Fighter I")						<input type="checkbox"/>		\$75			
Full Service Fire Fighter Operations (formerly "Fire Fighter I & II")								\$75			
<b>* Payment Options:</b>											
<b>1. Invoice Fire Department</b>											
Fire Department: _____						Fire Department Authorized Contact: _____					
Fire Department Authorized Contact Phone #: _____						Contact Email: _____					
Address: _____				City: _____		Province: _____		Postal Code: _____			
Fire Department Authorized Signature: _____											
<b>2. Cheque / Money Order</b>											
Cheque or Money Order payable to JIBC issued by: _____											
* If you wish to pay by credit card, please contact Registration cashier at 604.528.5590 or 1.877.528.5591 once you receive the invoice.											
<b>Return the application form/ payment to:</b> JIBC Admissions Office, 715 McBride Blvd., New Westminster, BC V3L 5T4 Fax: 604.528.5653 Email: <a href="mailto:admissions@jibc.ca">admissions@jibc.ca</a> Toll Free 1.877.528.5591											
<small>The Justice Institute of British Columbia respects your privacy. Personal information that you provide is collected pursuant to federal and provincial privacy legislation. It is collected for the purpose of administering admissions, registration, education programs, financial assistance and awards, student support services, graduation, alumni affairs and advancement, and for the purpose of statistical reporting. It may be disclosed to other educational institutions, federal and provincial government departments, co-sponsoring organizations, and the JIBC Alumni Association. Personal information is reported to Statistics Canada under the legal authority of the Statistics Act (see <a href="http://www.statcan.ca/english/concepts/ESIS">www.statcan.ca/english/concepts/ESIS</a>). If you wish further information please see <a href="http://www.jibc.ca/privacy">http://www.jibc.ca/privacy</a> or contact the Office of the Registrar.</small>											
* I hereby authorize the Justice institute of British Columbia to release my educational records and information in accordance with the JIBC Student Records Policy to the following Fire Department.											
Fire Department: _____						Fire Department Authorized Person: _____					
_____						_____					
<b>* Signature of Student</b>						<b>*Date</b>					

**For Internal Use Only**

<b>1. Application processed by Admissions office (initials) &amp; date processed</b>	<b>2. PERC processed by Registration Office (initials) &amp; date processed</b>
<b>3. Sponsorship processed by Cashier (initials) &amp; date processed</b>	<b>4. Fire &amp; Safety Division received (initials) &amp; date received</b>