

NITEP - INDIGENOUS TEACHER EDUCATION PROGRAM

ADMISSION APPLICATION

The Faculty of Education, The University of British Columbia, welcomes your application for admission to the Bachelor of Education program.

This form is to be used by applicants who wish to apply for admission to the NITEP - Indigenous Teacher Education Program.

When we have received all your required documents, we will evaluate your application and send you a letter advising you of the decision.

Offers of admission are valid only for the session indicated in the acceptance letter.

APPLICATION INSTRUCTIONS

Section A - PERSONAL DATA and APPLICATION FEES

Complete Section A in full.

All applicants must enclose an Application Fee. For applicants presenting all academic documents from within Canada, the fee is \$64.25 Canadian. For applicants presenting any academic documents from outside Canada, the fee is \$96.50. For applicants who have formerly applied and registered for undergraduate studies at the Faculty of Education (NOT including the School of Human Kinetics), the fee is \$37.00. These fees are non-refundable and should be made payable to The University of British Columbia by **VISA, MasterCard, money order or certified cheque in Canadian funds. If paying in person, cash or Interac is also accepted. Personal cheques are not accepted.** Applications will not be processed unless the appropriate application fees have been paid.

Section B - CITIZENSHIP OR IMMIGRATION STATUS

Complete Section B in full.

Permanent residents (landed immigrants) must provide proof of immigration.

Section C - PROGRAM OPTIONS

Select the Program Option to which you are applying and indicate the NITEP field centre where you intend to begin your program.

Secondary applicants indicate their teaching field(s).

NOTE: Offers of admission or re-admission are valid only for the session indicated on the letter of acceptance.

Application Deadline - see NITEP website

Section D - ACADEMIC HISTORY

Transcripts: Applicants are responsible for submitting official transcripts which have an official seal and signature (photocopies and faxed copies are not acceptable) for all post-secondary institutions attended and currently attending. **Official transcripts become the property of the University.** Irreplaceable documents will be returned upon written request.

- Transcripts from all post-secondary institutions are required.
- Source transcripts from all post-secondary institutions where courses were taken and transferred to other institutions are required.
- Current and former UBC students need not provide transcripts for courses and programs completed at UBC. However, they must provide transcripts from post-secondary institutions where courses were taken and transferred to UBC.
- All transcripts must be sent to the NITEP Office directly from institutions.

Section E - REFEREES

The Faculty accepts only two confidential reference reports.

NOTE:

Documents submitted in support of applications become the property of the University and will not be returned to the applicant.

If applicants have begun a teacher education program (or a Bachelor of Education program) at UBC or at another institution but not completed it, they must provide detailed information on a separate sheet. Applications will not be evaluated until this information is received.

Persons who have been convicted of, or given an absolute or conditional discharge on, a criminal offence and who are considering a teaching career, should write to the Teacher Regulation Branch (400-2025 West Broadway, Vancouver, BC, V6J 1Z6) before undertaking a teacher education program.

Applicants who are not admitted or who do not register in the program should note that any documents submitted will be held only for one year.

Freedom of Information

Personal information provided on this application and supplementary application forms is collected pursuant to the *University Act*, R.S.B.C. 1996, c. 468, and the *Freedom of Information and Protection of Privacy Act*, R.S.B.C. 1996, c. 165. The information will be used for the purposes of admission, registration and other decisions on your status at the University. Information may also be provided to University student and alumni bodies, to the professional organizations in British Columbia and may also be used for research purposes. When used for research purposes individual identities will not be disclosed.



THE UNIVERSITY OF BRITISH COLUMBIA FACULTY OF EDUCATION
APPLICATION FOR ADMISSION or RE-ADMISSION
NITEP - INDIGENOUS TEACHER EDUCATION PROGRAM: 2015 -16 WINTER SESSION

RETURN TO:
 NITEP
 Faculty of Education
 The University of British Columbia
 1985 West Mall
 Vancouver, BC V6T 1Z2
 Telephone (604) 822-5465
 (604) 822-8944
 E-mail: nitep.educ@ubc.ca

A. PERSONAL DATA AND APPLICATION FEE Last attendance at UBC in Faculty/School of _____ YEAR _____ Session _____

UBC Student Number			
Last of Family Name			
First or Given Name		Middle Name	
Previous Last or Family Name			
Address - Apt. # / Street			
City or Town			Province/State
Country			E-mail
Postal/Zip Code	Area Code	Home Telephone	Work Telephone
SEX		Date of Birth	Country of Birth
<input type="checkbox"/> Male	<input type="checkbox"/> Female	year month day	First Language
		Canadian Social Insurance Number	

APPLICATION FEE
 \$64.25 enclosed (Canadian documents only)
 \$96.50 enclosed (Non-Canadian documents)
 \$37.00 enclosed (re-application fee)
VISA, MasterCard, certified cheque (No personal cheques) or money order in Canadian funds accepted.

B. CITIZENSHIP OR IMMIGRATION STATUS: Permanent residents who are not Canadian citizens must submit proof of immigration with application

Canadian citizen Student authorization Visitor or other visa
 Permanent resident: Please specify the following. Date of Entry to Canada year _____ month _____ Country of citizenship _____

C. PROGRAM OPTIONS (Choose one option and one centre)

NITEP Elementary Option
 NITEP Secondary Option: Teachable Area(s) _____
 NITEP field centre: Duncan Kamloops/Merritt Urban Campus (Yr. 3-5 - re-admission only) Bella Bella

D. ACADEMIC HISTORY

Have you ever failed a year or been required to withdraw from UBC or another college or university? No Yes If yes, please name the institution: _____
 Have you ever begun a teacher education program but not completed it? No Yes If yes, please provide detailed information on a separate sheet.

LAST SECONDARY SCHOOL ATTENDED

Name of school	Province/Country	Grade/level	Graduation Date

ALL POST SECONDARY INSTITUTIONS ATTENDED OR CURRENTLY ATTENDING — MOST RECENT FIRST

Name of institution	Province/Country	From yy/mm	To yy/mm	Degree/Diploma earned	Date yy/mm	Student Number

E. REFEREES: Please name two persons unrelated to you whom you have requested to provide a confidential reference report on your behalf.

1. _____ 2. _____

F. DECLARATION OF APPLICANT

I agree that, in reading and completing this application, including supplementary application forms, I knowingly or carelessly provided untrue or incomplete information, (a) any offer of admission, whether accepted or not, may be withdrawn by the University; (b) I may be required to withdraw from any program or course in which I am enrolled; and (c) I may be subject to academic discipline.

I agree that the University may verify the information provided by contacting the relevant institutions, referees, and/or the Teacher Regulation Branch.

I agree that information on falsified documents is shared with the Association of Universities and Colleges of Canada.

I agree, if admitted to the University, to comply with all rules and regulations of the University, present or future.

SIGNATURE: _____ DATE: _____

Credit Card Payment Authorization Form

This form can be used to authorize payment to the Faculty of Education for **application fees only**. Tuition deposits and tuition fee payments for those admitted must be made directly to UBC via the electronic options available. For information on tuition fee payment methods please visit: <https://ssc.adm.ubc.ca/sscportal/servlets/SRVSSCFramework>

<i>Print clearly using ink</i>	

Full name of applicant for whom payment is being made	
Credit card being used:	<input type="checkbox"/> VISA <input type="checkbox"/> Master Card

Full name of card holder as it appears on the card	
Amount:	
\$	_____
Yr	Mo Day
	Date

Card holder's signature authorizing payment	

Credit card number	
Card expiry date (4 digits)	____/____
	Mo Yr
<i>For your protection, credit card information will be destroyed after payment has been processed.</i>	

Submit this form by mail or in person:

Teacher Education Office
Room 103, Neville Scarfe Building
2125 Main Mall
Vancouver, B.C.
V6T 1Z4

Important: we will NOT accept this form if it is submitted electronically (by email) due to security concerns.
Thank you for your cooperation.

or

By fax: 604-822-8944