Program Application Form
Interdisciplinary Diploma in Intercultural Education and Training

Personal Information
☐ Mr ☐ Miss ☐ Mrs ☐ Ms
Name: ____________________________________________________
Street address: ______________________________________________
----------------------------------------------------------------
CITY PROVINCE POSTAL CODE
Telephone ____________________ Cellphone _________________
Email: _____________________________________________________

Business Information
Position: ___________________________________________________
Company/Organization: _______________________________________
Street address: ______________________________________________
----------------------------------------------------------------
CITY PROVINCE POSTAL CODE
Telephone ____________________ Fax _________________
Business email: ______________________________________________

Where do you prefer to receive program mail and email?
☐ Home ☐ Business

Enrollment Status
☐ Seeking Admission to UVic
☐ Already a UVic Student: Student Number: _____________________

Application Date: ________________________________

Attachments to Application
New Applicants to UVic:
☐ University Admissions Form
☐ University Admissions Fee
☐ Transcripts (these can be submitted under separate cover if they are not
available at the time of application)

Returning UVic Students
☐ Application to Reregister Form
☐ Application to Reregister Fee (if applicable)

All Applicants
One-time program fee of $150. This must accompany your application and
is non-refundable if you withdraw. Please make cheque payable to the
University of Victoria. This fee will be returned if you are not accepted to the
program or the University.

Method of Payment:
☐ Cheque ☐ Money Order
Credit Card (for program fee only): ☐ Visa ☐ Mastercard

Educational Background
University or College Studies ___________________________________
...........................................................................
Professional Qualifications ___________________________________
...........................................................................
Secondary/High School Completion Date _________________________

Employment/Volunteer Background
Brief summary of recent employment and/or volunteer history
...........................................................................
...........................................................................
...........................................................................

Please complete both sides of this form.
Experience in multicultural/cross-cultural environments

Briefly describe your professional and personal experience in multicultural or cross-cultural environments

__________________________________________________________
__________________________________________________________
__________________________________________________________

Objectives for Program Participation

Session Applied For:  □ Winter  □ Spring  □ Summer

Year: ______________________

Are you also completing a UVic undergraduate degree?

□ No  □ Yes  Department: ______________________

Are you intending to register  □ Part Time  □ Full Time

What are your objectives in participating in the Diploma Program in Intercultural Education and Training?

__________________________________________________________
__________________________________________________________
__________________________________________________________
__________________________________________________________
__________________________________________________________
__________________________________________________________

References

1. Name ________________________________________________
   Position ______________________________________________
   Daytime Phone _________________________________________
   Email ________________________________________________

2. Name ________________________________________________
   Position ______________________________________________
   Daytime Phone _________________________________________
   Email ________________________________________________

Which course(s) do you plan to take in your first year?

__________________________________________________________
__________________________________________________________

How did you first hear of the program?

□ UVic Calendar
□ Brochure
□ Poster
□ Website
□ Local organization
□ Other: ________________________________________________
__________________________________________________________

SIGNATURE OF APPLICANT

__________________________________________________________

DATE

FOR OFFICE USE ONLY

Application approved:

Joy Davis, Program Director, Intercultural Education and Training

Date

Comments: _____________________________________________
__________________________________________________________

cc: Program Steering Committee (pro forma)

Return to:  Miranda Angus
Intercultural Education and Training Program
Division of Continuing Studies, University of Victoria
PO Box 1700 STN CSC
Victoria, BC V8W 2Y2
Phone 250-721-8462
Fax 250-721-8774
Email iet@uvcs.uvic.ca
Web www.continuingstudies.uvic.ca/intercultural

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