

SPONSOR



Continuing Education
& Training

SPONSORSHIP PACKAGE

Sponsoring a Student in Continuing Education Courses at North Island College

North Island College Continuing Education offers a wide variety of programs and courses across three campuses. Whether you are a business or organization seeking to enhance your employees' skills, or a prospective student seeking relevant upgrading to boost your career, we are here to help.

Please review these step-by-step instructions in order to complete a sponsorship package successfully.

Continuing Education Registration Form	STEP-BY-STEP
Personal Information Section	1. Input the prospective student's "Personal Information" as fully as possible, including home address and other details, so we can create a file for them. If the prospective student has attended previous classes at NIC, but doesn't know student number, please leave that particular field blank.
Course Selection Section	2. Under "Course Selection" please input the actual course number of the class the student wishes to take: IE: BKK-010 for Basic Bookkeeping, then list the campus location, start date, and course fee.
Sponsoring Organization/Company	3. Input the Sponsoring Organization/Company and a Purchase Order number (if known). (This is the name of the company or organization that will pay for the course.)
Signatures	4. Make sure to sign and date BOTH the "Student Signature" field AND the "Declaration" Signature fields.
Voluntary Disclosure Section	5. Complete the "Voluntary Disclosure" questionnaire, if desired.

Continuing Education Funding Agency Sponsorship Agreement	STEP-BY-STEP
Student Information Section	1. Prospective students should complete the "Student Information" section as fully as possible. If student has attended previous classes at NIC, but doesn't know student

	number, please leave that field blank. Please provide all current contact information.
Release of Information Section	2. The Release of Information effective dates will be the "start" and "end" dates of sponsored courses.
Student Signature Field	3. Here, the student should sign and date the "Student Signature" field.
Intended Program/Course(s)	4. Input the actual course code number of the course the employee or sponsored student wishes to take.
EMPLOYER INPUT STARTS HERE	
Agency Information Section	5. Input the Sponsoring Organization/Company name. (This is the name of the company or organization that will pay (or sponsor) the student.
Fee Section	6. Most stand-alone CE courses include the book fee within the course amount. Tick the "Fees as estimated..." box and list the total amount of the course listed on the website. Disregard the application and assessment fee unless otherwise advised by Continuing Education.
Name & Title Section; Signature & Date.	7. Here, the employer or sponsoring party should list the name of the individual at the business or organization that will be sponsoring the course, including contact phone number, if available. Ensure the authorized employer or organization representative signs and dates the sponsorship form.

SUBMISSION/CONTACT DETAILS:

Please submit the completed Registration and Sponsorship forms in one email to Continuing Education department that will be hosting the course (or the campus) at your earliest convenience. Once processed, the student or sponsored party will receive an acknowledgement receipt electronically. The employer/sponsoring party will receive a request for payment by mail at the address provided.

CONTACT INFORMATION FOR SPONSORSHIP INQUIRIES	
Campbell River	CETinfo-CR@nic.bc.ca Tel: 250-923-9750
Comox Valley	CETinfo-CV@nic.bc.ca Tel: 250-334-5005
Port Alberni	CETinfo-PA@nic.bc.ca Tel: 250-724-8742



CONTINUING EDUCATION: REGISTRATION FORM

Personal Information

Have you ever attended North Island College? Yes No If yes, NIC Student No.:

Legal Last Name: First Name: Middle Name:

Former Last Name: (If applicable) Preferred First Name:

Mailing Address: City:

Province: Country: PC:

Home Phone: Other Phone: Email Address:

Birthdate: yy / mm / dd Gender: M F

Emergency Contact Name: Home Phone: Other Phone:

Canadian Citizen Permanent Resident If Permanent Resident, Country of Origin:

International Student If International Student, Country of Origin: CDN

COURSE SELECTION

Course Code	Course Location	Course Date(s)	Tuition
1.			
2.			
3.			

For Sponsored Students Only

Sponsoring Organization/Company: PO No.:

I hereby authorize the release of all academic records relating to my admission or education to the sponsoring agency.

Student Signature: Date:

Voluntary Disclosure

Do you identify yourself as an Aboriginal Person? Yes No
If so are you: First Nations Metis Inuit

Voluntary Disclosure

Disability/medical condition? Yes No
NIC will provide you with information about receiving support services.

DECLARATION: PLEASE READ THE FOLLOWING BEFORE SIGNING

I declare that the information I have submitted on the application is true and correct. Falsifying any document or information submitted will result in the immediate cancellation of admission or registration at the College. I understand that this information along with subsequent information is collected under the authority of the College and Institute Act. This information will be protected and used in compliance with the BC Freedom of Information and Protection of Privacy Act for the purpose of admission, registration, research, graduation, alumni development and other purposes consistent with the mandate of the institution. For individuals admitted to a co-admission program with partner institutions, I understand that all the details of my application, studies, and student conduct record will be shared openly between NIC and the partner institution.

Student Signature: Date:

Payment options

- In person: Bring this completed form with payment (cash, cheque, debit, or credit card) to one of our campuses during Student Services office hours.
- Online: Visit www.nic.bc.ca/continuingeducation and click *Registration Available*
- Mail: Mail completed registration form to Student Services with payment by cheque with full fees. No post-dated cheques are accepted. To help prevent credit card fraud DO NOT write your credit card information anywhere on this form.



Funding Agency Sponsorship Agreement

STUDENT INFORMATION

Student Number _____

Last Name _____ First Name _____ Middle Name or Initial _____

Mailing Address _____

City _____ Province _____ Postal Code _____

Telephone Home _____ Work _____ Cell _____

Release of Information

The funding agency named below has my permission to access my student records, registration and any personal information necessary for, or pertaining to, my application and enrolment at North Island College.

Permission is in effect from _____ to _____
MONTH DAY YEAR MONTH DAY YEAR

Student Signature _____ Date (mmm-dd-yyyy) _____

COLLEGE INFORMATION (may be accessed on the website www.nic.bc.ca or contact an NIC advisor)

Intended Program and/or Courses	Term and/or Start/End Date	Estimated Fees (includes tuition, lab, and student union fees)	Estimated Books

AGENCY INFORMATION

Agency Name _____

Mailing Address _____

City _____ Prov. _____ Postal Code _____

Contact Name _____ Title _____

Telephone _____ Fax _____ Email _____

We hereby undertake to sponsor the above named student in the above described program/course(s) for:

- Fees as estimated above or other amount \$ _____
- Books as estimated above or other amount \$ _____
- Learner Resource Fee (\$5 per credit or equivalent for post-sec level courses only)
- Application Fee \$ 25.00
- Assessment Fee \$ 15.00
- * Health & Dental Insurance Fee \$275.00

*See <http://nisu.ca/> for more information about mandatory Health & Dental fees and students can opt out if eligible.

Additional instructions _____

Name & Title (print) _____

Signature _____ Date _____

FREEDOM OF INFORMATION/ PROTECTION OF PRIVACY

I understand that this information, along with subsequent information, is collected under the authority of the College and Institute Act. This information will be protected and used in compliance with the BC Freedom of Information and Protection of Privacy Act.

CAMPBELL RIVER CAMPUS
 1685 South Dogwood Street
 Campbell River, BC V9W 8C1
 T (250) 923-9700/1-800-715-0914
 E: forms@nic.bc.ca

COMOX VALLEY CAMPUS
 2300 Ryan Road
 Courtenay, BC V9N 8N6
 T (250) 334-5000/1-800-715-0914
 E: forms@nic.bc.ca

PORT ALBERNI CAMPUS
 3699 Roger Street
 Port Alberni, BC V9Y 8E3
 T (250) 724-8711 /1-800-715-0914
 E: forms@nic.bc.ca

MT. WADDINGTON CAMPUS
 140 - 8950 Granville Street, Box 901
 Port Hardy, BC V0N 2P0
 T (250) 949-7912/1-800-715-0914
 E: forms@nic.bc.ca