



Office of the Registrar
 2300 Ryan Road
 Courtenay, BC V9N 8N6
 T: 1-800-715-0914 E: forms@nic.bc.ca

APPLICATION FOR CREDENTIAL

NIC STUDENT NUMBER

PERSONAL DATA

Print name (below) **exactly** as you want it to appear on your document

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Mailing Address for Credential

ADDRESS			
CITY	PROVINCE	COUNTRY	POSTAL CODE
PHONE NUMBER		E-MAIL ADDRESS	

Month/Year you expect to complete or have completed your program.

Have you been given approval for any substitutions or exemptions: Yes No

_____ / _____
 MONTH YEAR

Please indicate if you are in Co-op Education: Yes No

CREDENTIAL COMPLETED (check one) - Note: One Complimentary Transcript will be included with your credential at no charge.

DEGREES

Bachelor of Business Administration

ASSOCIATE DEGREES

Associate of Arts
 Associate of Science

DIPLOMAS

Advanced Digital Design & Development
 BC Adult Graduation
 Business Administration
 Option _____
 Bus Admin – Post Graduate Diploma
 Option _____
 Coastal Forest Technology
 Communication Design
 Criminology
 Culinary Business Operations
 Digital Design & Development-Post Graduate Diploma
 Option _____
 Early Childhood Care & Education
 Option _____
 Fine Arts
 Global Tourism & Hospitality Mngt-Adv
 Human Services

Instrumentation & Electrical Automation Tech
 Island Pre-Health Science Advanced
 Practical Nursing
 Social Service
 Tourism & Hospitality Management
 Option _____
 Web & Mobile Application Development

Engineering Foundations
 Furniture Design and Joinery
 Global Tourism & Hosp Mgmt Advanced
 Health Care Assistant
 Heavy Mech Trades Foundation
 Hospital Unit Clerk
 Human Services Ed Assistant
 Option _____
 Indigenous Leadership
 Indigenous Language Fluency
 Metal Fabricator Foundation Harmonized
 Metal Jewellery Design
 Motor Sport & Power Equip Tech Fdn
 Office Administration
 Option _____
 Parts & Warehousing Person Foundation
 Plumbing & Piping Trades Foundation
 Professional Cook Level _____
 Tourism & Hospitality Management
 Web Design Fundamentals
 Welder Foundation Harmonized

CERTIFICATES

Activity Assistant
 Adventure Guiding
 Aircraft Structures Technician
 Aquaculture Technician
 Automotive Collision & Refinishing Technician Foundation
 Automotive Service Technician Foundation Harmonized
 Business Administration
 Carpentry Foundation Harmonized
 Coastal Forest Worker
 Computer Information Systems
 Culinary Business Operations
 Early Childhood Care & Education
 Electrical Foundation Harmonized

If program is not listed, please indicate here: _____

<ul style="list-style-type: none"> The information on this form is collected under the authority of the College and Institute Act, and will be used for the purpose shown above. Queries about the collection or correction of personal information should be addressed to the Registrar at the address on the top of this form. I give North Island College permission to use my name and achievements in graduation publications or announcements. I hereby authorize North Island College to release my student records to the addressee on this form.
<p>_____ Student Signature</p> <p>_____ Date</p>

FOR SRO USE ONLY

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Date Received: _____
 Received By: _____