



MANDATORY APPLICANT QUESTIONNAIRE CARDIOVASCULAR PERFUSION

Admissions

3700 Willingdon Avenue, Burnaby, BC, Canada V5G 3H2

Instructions: 1) Save this PDF to your desktop, 2) Open with Adobe Reader or Adobe Acrobat, 3) Complete all required fields, 4) Save, 5) Close PDF then re-open to ensure the content you filled in has saved, 6) Submit to BCIT.

Your BCIT ID Number A0	Legal First Name (given name)	Legal Last Name (family name)
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- This form is a program entrance requirement and submission with your application is mandatory.
- You must save this form to your computer and upload the completed version to your online application.
- The program area will evaluate your answers; please use proper English, grammar and punctuation.

Having carefully read the minimum requirements on the Program Entry web page for the program, I submit my application for consideration under the following option and have uploaded the relevant evidence required for application under this option.

- ☐ **Option 1** Two years current experience as Certified Respiratory Therapist (CRT) or Critical Care RN, plus statistics course – you must upload evidence of employment experience and a transcript showing completion of the statistics course to your application.
- ☐ **Option 2** Course work – You must upload transcripts to your application as evidence of successful completion of all required course work under Option 2.

REASON FOR SELECTING PROGRAM

Describe the reason(s) you have selected this program and why working as a clinical perfusionist in this profession is a good fit for you.

PERSONAL STRENGTHS

Describe the skills and aptitudes you possess that you believe would make you successful in the profession.

RELATED EXPERIENCE

Do you have any relevant experience? Please list below:

POSITION 1 Type of Position	Start Date	End Date
	Position Title	Company Name
	City	Province
Main responsibilities of this position 1. 2. 3.		
Main skills and abilities required in this position 1. 2. 3.		
POSITION 2 Type of Position	Start Date	End Date
	Position Title	Company Name
	City	Province
Main responsibilities of this position 1. 2. 3.		
Main skills and abilities required in this position 1. 2. 3.		

POSITION 3 Type of Position	Start Date	End Date
	Position Title	Company Name
	City	Province
Main responsibilities of this position 1. 2. 3.		
Main skills and abilities required in this position 1. 2. 3.		

TECHNICAL SKILLS

Do you have any technical skills relevant to this program of study? If yes, describe below:

Skill 1

How is this skill relevant?

Skill 2

How is this skill relevant?

Skill 3

How is this skill relevant?

RELATED ACADEMIC OR COURSE WORK

Have you done any course work relevant to this program of study (outside of program pre-requisites)? ☐ Yes ☐ No

RESEARCH EXPERIENCE

Briefly discuss how you have applied the research process to your academic studies or work environment.

OUTSTANDING ACCOMPLISHMENTS

Are there any outstanding accomplishments you would like to share? If yes, briefly describe.

ADDITIONAL INFORMATION

Briefly discuss any additional information you feel is important for the Admissions Committee to know in considering your application.