



StudentAidBC

PROGRAM ELIGIBILITY DECLARATION

For Private Post-Secondary Schools

PLEASE REFER TO THE SABC ADMINISTRATION MANUAL, SECTION 3, FOR INSTRUCTIONS TO COMPLETE THIS FORM.

SECTION 1 – SCHOOL INFORMATION

(01) SCHOOL NAME (02) SCHOOL CODE

(03) SCHOOL ADDRESS (site location of program delivery)

(04) CITY/TOWN (05) PROVINCE (06) POSTAL CODE

(07) PHONE NUMBER (08) FAX NUMBER

AREA CODE NUMBER AREA CODE NUMBER

SECTION 2 – PROGRAM INFORMATION

(01) CHOOSE ONE: A ADD PROGRAM B REVISE PROGRAM C DELETE PROGRAM

(02) NEW/CURRENT NAME (03) CODE (04) PREVIOUS NAME (IF APPLICABLE)

(05) CREDENTIAL OFFERED: A DIPLOMA B CERTIFICATE C DEGREE D OTHER: (SPECIFY)

(06) YEAR OF A YEAR PROGRAM A FIXED PACED B SELF PACED

(07) LENGTH OF PROGRAM: . WEEKS (08) TOTAL PROGRAM HOURS:
(NOT TO EXCEED 52 WEEKS) (INCLUDING WORK PLACE EXPERIENCE AND PRACTICUM HOURS)

(09) PRACTICUM REQUIREMENT A HRS. CLINICAL REQUIREMENT B HRS. PRECEPTORSHIP C HRS.
(NOT TO EXCEED 20% OF PROGRAM DURATION) (NOT TO EXCEED 50% OF PROGRAM) (NOT TO EXCEED 10% OF PROGRAM)

PRE-ACCREDITATION INTERNSHIP / EXTERNSHIP D HRS.
(NOT TO EXCEED 20% OF PROGRAM DURATION)

(10) REGULATING AUTHORITY:

HOURS PROGRAM IS OFFERED: (8:00 TO 5:00)

DAYS: _____ TO _____

EVENINGS: _____ TO _____

WEEKENDS: _____ TO _____

CONTINUOUS ENTRY YES NO IF NO THEN:

START DATE (YY/MM/DD) END DATE

_____ TO _____

_____ TO _____

_____ TO _____

ALLOWED EDUCATION COSTS:

ACTUAL TUITION _____

MANDATORY FEES _____

PROGRAM RELATED COSTS _____
(books, supplies, instruments)

EXCEPTIONAL EXPENSES _____
(compulsory trips, practicums, etc.)

SCHEDULED SCHOOL BREAKS: (SHOW DATES)

CALENDAR YEAR – END _____

SUMMER _____

OTHER _____

OTHER _____

START DATE (YY/MM/DD) END DATE

_____ TO _____

_____ TO _____

_____ TO _____

ADDITIONAL FEES (LIST)

DESCRIPTION OF PROGRAM: _____

SECTION 3 - DECLARATION

1.	The program if offered at a full time (100 percent) course load.	<input type="checkbox"/> YES <input type="checkbox"/> NO
2.	The program is at the post-secondary level.	<input type="checkbox"/> YES <input type="checkbox"/> NO
3.	A formal post-secondary credential will be issued by the institution.	<input type="checkbox"/> YES <input type="checkbox"/> NO
4.	The program, in its current format, is approved by PCTIA or DQAB.	<input type="checkbox"/> YES <input type="checkbox"/> NO
5.	The program is at least 12 weeks in length.	<input type="checkbox"/> YES <input type="checkbox"/> NO
6.	Any break in study will not exceed the StudentAid BC allowable (no more than two [2] consecutive weeks, three [3] over calendar year - end)	<input type="checkbox"/> YES <input type="checkbox"/> NO
7.	The total breaks in study period will not be more than 10 percent of the study period weeks.	<input type="checkbox"/> YES <input type="checkbox"/> NO
8.	If this is a vocational/technical program, a) How many instructional hours per week? <input type="text"/> Hours b) Is this number of hours standard for the Institution? c) The program will have a minimum of 20 hours per week	<input type="checkbox"/> YES <input type="checkbox"/> NO
9.	If this is a program for academic credit, a) How many credits earned per term? <input type="text"/> Credits b) Is the number of credits standard for the institution?	<input type="checkbox"/> YES <input type="checkbox"/> NO
10.	The published minimum entrance requirements are 19 years of age prior to the start of the study period or graduation from grade 12 (or equivalent).	<input type="checkbox"/> YES <input type="checkbox"/> NO
11.	<input type="checkbox"/> If the program is delivered off - site, via distance, correspondence or other off - site method, it meets an equivalency described below (indicate which). <input type="checkbox"/> <input type="checkbox"/> a) An equivalent course (academic/vocational/technical) is delivered on site. b) The student earns the same number of credits in the same time period as students in other StudentAid BC eligible programs delivered on-site. c) The student will earn academic credits recognized at another designated institution listed in the BC Transfer Guide or other acceptable articulation agreements from other jurisdictions.	<input type="checkbox"/> N/A <input type="checkbox"/> YES <input type="checkbox"/> NO
12.	If this is a Partnership/Joint Program, the student is registered and pays all required fees to your institution.	<input type="checkbox"/> N/A <input type="checkbox"/> YES <input type="checkbox"/> NO
13.	If a partnership, the second school is designated/accredited for StudentAid BC purposes. Name of Partner <input type="text"/>	<input type="checkbox"/> N/A <input type="checkbox"/> YES <input type="checkbox"/> NO
PRACTICUM (UNPAID)		<input checked="" type="checkbox"/> N/A
14.	The practicum component is a mandatory requirement to obtain the credential	<input type="checkbox"/> YES <input type="checkbox"/> NO
15.	The percentage practicum duration to total program length is not more than 20 percent	<input type="checkbox"/> YES <input type="checkbox"/> NO
16.	The students are unpaid	<input type="checkbox"/> YES <input type="checkbox"/> NO
17.	The students are supervised and evaluated by the practicum host	<input type="checkbox"/> YES <input type="checkbox"/> NO
18.	The students will be monitored by the instructor/institution	<input type="checkbox"/> YES <input type="checkbox"/> NO

CLINICAL PLACEMENT (UNPAID) ■ N/A

- | | | | |
|-----|---|------------------------------|-----------------------------|
| 19. | The clinical placement component is mandatory requirement to obtain the credential | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 20. | The percentage of total clinical placement to the total program length is not greater than 50 percent | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 21. | The students are unpaid | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 22. | The instructor/student ratio is 1:12 or less | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 23. | The clinical placement in a real-life setting under the immediate supervision of a fully qualified individual | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 24. | The students will be monitored by the instructor/institution | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

PRECEPTORSHIP (UNPAID) ■ N/A

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|-----|---|------------------------------|-----------------------------|
| 25. | The preceptorship component is a mandatory requirement to obtain the credential | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 26. | The percentage of the total preceptorship of the total program length is not greater than 10 percent | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 27. | The students are unpaid | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 28. | The preceptorship is in a real - life setting under the immediate supervision of a fully qualified individual | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 29. | The students will be monitored by the instructor/institution | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

PRE-ACCREDITATION INTERNSHIP/EXTERNSHIP ■ N/A

- | | | | |
|-----|---|------------------------------|-----------------------------|
| 30. | The internship/externship component is a mandatory requirement to obtain the credential | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 31. | The percentage of the total preceptorship of the total program length is not greater than 20 percent | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 32. | The students are unpaid | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 33. | The preceptorship is in a real - life setting under the immediate supervision of a fully qualified individual | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 34. | The students will be monitored by the instructor/institution | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

PAID WORK TERM (CO-OP EDUCATION) ■ N/A

- | | | | |
|-----|---|------------------------------|-----------------------------|
| 35. | The students will be paid at competitive rates for work performed | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 36. | The percentage of total co-op work term to total time spent in institution study does not exceed 50 percent | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 37. | Work assignments will be related to the field of study and employer evaluation be part of the institution records | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 38. | Students progress and performance will be monitored by the institution in the form of onsite visits | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

PRACTICE EDUCATION

N/A

39. The total combined practice education (practicums, clinical placements, preceptorships, internships and externships) does not exceed 50 per cent of the program of study. (Exceptions can be made for medicine, nursing and dentistry. Also, institutions can request special dispensation from this restriction on an individual program basis and where governing bodies have different requirements.)

YES NO

If you have answered NO to any of the above statements, the program does NOT qualify for StudentAid BC funding. If you have answered YES, please attach a brochure and course outline AND send a copy of the form to StudentAid BC, Compliance Unit. Declare new or revised eligible programs to StudentAid BC and provide annual declaration of program eligibility. Retain a copy for your records.

INITIAL OF SCHOOL OFFICIAL _____

StudentAid BC CODE

StudentAid BC use Approval _____

StudentAid BC use Denial _____

DATE _____

SECTION 4 – ADDITIONAL INFORMATION PROVIDED BY SCHOOL

SCHOOL ADDRESS (if more than one site location is used to deliver the program.)

Grid for school address input

CITY/TOWN

Grid for city/town input

PROVINCE

Grid for province input

POSTAL CODE

Grid for postal code input

SCHOOL ADDRESS

Grid for school address input

CITY/TOWN

Grid for city/town input

PROVINCE

Grid for province input

POSTAL CODE

Grid for postal code input

ADDITIONAL INFORMATION CON'T

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