

Vancouver Community College
Health Care Assistant Program

English Language Declaration Form

All applicants are asked to review and confirm the information in this document as part of their admission to a recognized British Columbia Health Care Assistant Program. This form will be kept in the student file and may be supplied to the Registry upon request.

Applicant Name: _____ Date: _____

I. Check the (ONE) statement that applies to you:

- I have been educated in an English-speaking environment (a country with English language systems / institutions*) for a minimum of seven years.
- I have been educated in an English-speaking environment (a country with English language systems / institutions*) for three consecutive years at the secondary or post-secondary level.
- I have been educated in an English-speaking environment (a country with English language systems / institutions*) for less than seven years.
- I have **not** been educated in an English speaking environment (a country with English language systems / institutions*)

2. Countries with English language systems / institutions (where English is a primary, official language and the language used for education)

American Samoa	Dominica	Mauritius	Uganda
Anguilla	Falkland Islands	Montserrat	United Kingdom (England, Scotland, Wales and Northern Ireland)
Antigua	Fiji	New Zealand	United States of America (USA)
Australia	Ghana	Seychelles	US Virgin Islands
Bahamas	Grenada	Singapore	
Barbados	Guam	South Africa	
Belize	Guyana	St. Kitts and Nevis	
Bermuda	Irish Republic	St. Lucia	
British Virgin Islands	Jamaica	St. Vincent	
Cayman Island	Kenya	Trinidad and Tobago	
Canada*	Malta	Turks and Caico Islands	

*Applicants educated in Quebec at an institution where the language of instruction was not English, must provide evidence of external English language proficiency testing.

2. Use the table below to enter your education as indicated above.

Example: Years 1980-1988 1988-2002 2002-2006	Example: School, location ABC Elementary School, BC XYZ High School, BC Best College, BC

3. Applicant Declaration

I, _____ (name of applicant), declare the above to be true.

Date: _____

For Office Use

Evidence Required from Applicant:

- First Language is English - Evidence of English 10 or equivalent is required. Outline what was provided as evidence.

- First Language is not English - English Language Proficiency test score is required. Outline what was provided as evidence.

Reviewed by: _____ **Signature:** _____ **Date:** _____

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