

# REQUEST FOR SPECIAL ADMISSION



Office of the Registrar

|                                                                 |                                                                         |                                                    |                                                               |
|-----------------------------------------------------------------|-------------------------------------------------------------------------|----------------------------------------------------|---------------------------------------------------------------|
| <b>Abbotsford</b><br>33844 King Rd<br>Abbotsford, BC<br>V2S 7M8 | <b>Chilliwack at CEP</b><br>45190 Caen Ave<br>Chilliwack, BC<br>V2R 0N3 | <b>Hope</b><br>1250 7th Ave<br>Hope, BC<br>V0X 1L4 | <b>Mission</b><br>33700 Prentis Ave<br>Mission, BC<br>V2V 7B1 |
|-----------------------------------------------------------------|-------------------------------------------------------------------------|----------------------------------------------------|---------------------------------------------------------------|

604.854.4501

**Toll Free:** 1.888.823.8734

**Fax:** 604.853.0138

**Instructions:** complete this form in **dark blue or black ink** and submit it along with your application for admission, application fee, and all supporting documents, before:

**April 30 for Fall entry**

**October 31 for Winter entry**

**February 28 for Summer entry**

Requests may be considered after deadline on a case-by-case basis

|                                                    |                                         |          |                         |                 |
|----------------------------------------------------|-----------------------------------------|----------|-------------------------|-----------------|
| <b>P<br/>E<br/>R<br/>S<br/>O<br/>N<br/>A<br/>L</b> | Student's full legal name               |          |                         |                 |
|                                                    | UFV student number                      |          | Daytime phone           | Alternate phone |
|                                                    | Mailing address (street number, street) |          |                         |                 |
|                                                    | City or Town                            | Province | Country (if not Canada) | Postal code     |
|                                                    | UFV program applied/applying for        |          |                         |                 |

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|----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|
| <b>O<br/>P<br/>T<br/>I<br/>O<br/>N<br/>A</b> | For students who will complete all secondary school graduation requirements before the start of the semester. Please submit the following:                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                 |
|                                              | <input type="checkbox"/> Application for Admission form (including \$45 application fee), if you have not already applied.<br><input type="checkbox"/> Your most recent transcript and proof of enrollment or registration in all courses required for graduation. Please provide the original in person or have your school fax a transcript to 604-853-0138<br><input type="checkbox"/> Proof of graduation by the end of the first month of UFV classes (e.g. Sept. 30 for Fall semester). If you cannot provide proof of graduation by the required time, you must apply for Option B. |                                 |
| <b>A</b>                                     | Complete the following: I will meet the secondary school graduation requirements by (check one):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | My anticipated completion date: |
|                                              | <input type="checkbox"/> Writing supplemental examinations in _____<br><input type="checkbox"/> Completion of _____ at _____ (Institution)                                                                                                                                                                                                                                                                                                                                                                                                                                                 | _____                           |

|                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |
|----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>O<br/>P<br/>T<br/>I<br/>O<br/>N<br/>B</b> | For students who will NOT be completing all secondary school graduation requirements before the start of the semester. Please submit the following:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |
|                                              | <input type="checkbox"/> Application for Admission form (including \$45 application fee).<br><input type="checkbox"/> A letter from you explaining the reason for the request, and your rationale for special consideration.<br><input type="checkbox"/> A transcript of your high school grades (all Grade 11 & 12 grades). Please provide the original in person or have your school fax to 604-853-0138<br><input type="checkbox"/> A letter of recommendation from a UFV advisor or counselor.<br><input type="checkbox"/> Additional documentation to support your request, if applicable (e.g. doctor's letter).<br><input type="checkbox"/> Applicants to the Adult Basic Education (ABE) program must also submit a letter of release from your high school principal or school district superintendent. |  |

|                     |                               |
|---------------------|-------------------------------|
| Student's signature | Date<br>Y Y Y Y   M M M   D D |
|---------------------|-------------------------------|

**Please forward this form by mail or fax to...**  
 UFV Admissions, Office of the Registrar, Abbotsford Campus  
 33844 King Road  
 Abbotsford, BC V2S 7M8  
 Fax: 604.853.0138



**For further information, please call 604.864.4645 or toll free 1.888.823.8734**