

Langara College

Animal Control Basic Training Certificate Program

APPLICATION FORM

PROGRAM DATES: MAY 8-13, 2017

| | | |
|---|---|------------------------------|
| 1. APPLICANT PERSONAL INFORMATION | | |
| Name: Last | First Name | Date of Birth (YEAR-MM-DD) |
| Home Address (include city and postal code) | | Home Phone |
| Preferred Email | Cell Phone | Work Phone |
| 2. APPLICATION FEE PAYMENT - \$40.00 (non-refundable) | | |
| <input type="checkbox"/> A cheque or money order in Canadian Funds, made payable to "Langara College Continuing Studies" or <input type="checkbox"/> Credit card payment (please provide name on credit card information below): | | |
| <input type="checkbox"/> Visa Number: | <input type="checkbox"/> MasterCard Number: | Expiry Date: |
| Authorized credit card signature: | Name on Credit Card: | Phone number of card holder: |
| 3. PROGRAM FEE PAYMENT - \$1,449 (Early bird discount available). | | |
| Please select payment option: <input type="checkbox"/> A cheque or money order in Canadian Funds, made payable to "Langara College Continuing Studies" <input type="checkbox"/> Credit card payment. \$1,304.10 will be charge if payment request received on or before March 1, 2017. After this date the charge will be \$1,449.00. If a card, different from above, should be charged, please include this information <input type="checkbox"/> Employer invoice at the address shown below (or indicate alternative employee billing information on pg 2, section 11.) | | |
| 4. ADDITIONAL APPLICANT INFORMATION | | |
| <input type="checkbox"/> I am currently employed as a Bylaw Officer, Animal Control Officer, or other regulatory official (please fill out employer authorization information located below.) You do not need to complete item #7 <input type="checkbox"/> I am not currently an officer (as identified in the statement above) and am taking this program for personal or career development (please submit prerequisite documentation as outlined on the next page. You do not need to complete #5 | | |
| 5. EMPLOYER AUTHORIZATION/CONTACT INFORMATION | | |
| By signing below you certify that you approve this employee's enrollment in the Langara CS Animal Control Basic Training Program. Invoice options are available. Please email kramsdn@langara.ca to inquire. | | |
| Applicant's Current Employer: | Applicant's Title: | |
| Employer Address (include city and postal code): | Manager Name | |
| Manager Signature | Manager Email | Manager Phone |
| 6. APPLICANT ACKNOWLEDGEMENT | | |
| By signing below you certify that all statements on this application and attachments are accurate and that you approve this employee being enrolled in the Langara CS Animal Control Basic Training Program | | |
| Applicant's Signature | Date: | |

7. REQUIRED PREREQUISITE/DOCUMENT CHECKLIST FOR NON ENFORCEMENT OFFICIALS

- Registered in/or Completed Langara CS "Introduction to Animal Control Course" ACBT1050.
Date of Completion: _____
- Supporting letters/documents, and contact information to confirm a minimum of two ride-alongs with an Animal Control Officer and/or a SPCA officer, within the last six months.
- Copy of current resume, and high school transcript showing Grade 12 English (or equivalent documentation)
- Transcript or certificate reflecting successful completion of JIBC Bylaw Level 1 or equivalent.

8. APPLICATION PROCESS

- Only complete applications will be processed.
- Review "Application Instructions" included with this application form or on the website www.langara.ca/pets
- All sections of this application are **MANDATORY**. Where not applicable please indicate **N/A**.
- **PLEASE PRINT CLEARLY** - Certificates will be printed, as the name appears on this application.
- Note: Program may fill in advance of application deadline. You are encouraged to complete your application as early as possible. Seats are limited and are assigned on a qualified, first-come-first-served basis.
- If you are being sent by your employer you may request to be invoiced. Please email kramsdn@langara.ca with completed application and request for invoicing.

9. Submit your completed application, documentation, application fee and program fees (if applicable) to:

MAIL OR IN PERSON

Animal Control Basic Training
Langara College CS
100 W. 49th Ave,
Vancouver V5Y 2Z6

Fees may be paid by cheque, money order, Visa, or MasterCard

FAX:

604.323.5899

Fees may be paid by Visa or MasterCard.
Note: Original application form must follow by mail.

EMAIL:

kramsdn@langara.ca

Fees may be paid by Visa or MasterCard.
Note: Original application form must follow by mail.

10. IMPORTANT DATES

**Early Bird Discount (10%)
Deadline:**
March 1, 2017

Application Deadline:
April 1, 2017

Program Start Date:
May 8-13, 2017

Alternative Billing Information (if required)

11. EMPLOYER AUTHORIZATION FOR INVOICING (If different then information provided in section 5.)

By signing below you certify that the program fee is to be invoiced and paid by the employer listed below.

| | | |
|--|--------|------------------------------|
| Employers' Company Name: | | Applicant's Name: |
| Employer Address (include city and postal code): | | Invoice to the attention of: |
| Title: | Phone: | Email: |

Learn more.

Karen Ramsden | Program Coordinator, Langara CS
T 604-323-5926 | F 604-323-5899 | kramsdn@langara.ca | www.langara.ca/pets