

20575 Thorne Avenue Maple Ridge, B.C. V2X 9A6

Email: rmc@sd42.ca

Phone #: 604-466-6555 (Ext 2.) Website: www.rmcollege.sd42.ca

Education Assistant Certificate Program Application and Checklist

Please include the following with this application, in addition to completing this form:

- **1.\$30.00** application fee non-refundable.
- **2.Two (2) letters of reference**, preferably from professionals in education, childcare, special needs services, recreational programs, or community agencies.
- **3.A HAND-WRITTEN letter/ statement** indicating why you feel you will be a good candidate for this program (approximately one page), to include any experience dealing with children of all ages or any individuals with special needs.
- **4.Transcripts / Diploma** or proof of completion of **Grade 12** and other post-secondary programs, if applicable.
- 5. Statement that the applicant will pass a Criminal Records Check for working in the vulnerable sector the College will run this check upon acceptance into the program.
- 6. Optional: resume and any other documentation that may enhance your application.
- 7. Copy of Photo Identification with birthdate (ex: Driver's License, Passport, BCID)

Late applications may be considered **but only if space remains** and once applicants who met the application deadline have been considered.

Please print clearly the following information:

Legal Name:		
Last name	First name	Middle name(s)
Address:		
City:		de:
E-mail address:		
Phone (preferred contact):		
Phone (secondary cell or wor	k number, if available)	:
Please select which intake:		
☐ January Intake		



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* Proficiency in English language (written and oral) is required. Assessment of English level may be requested at the discretion of the coordinator.*

Educational / Work Background

High School Graduation:					
School Name:		Year:			
	elevant accredited courses co / Degrees earned:	empleted or Certificates/			
Year	Course / Award name	School/ Institution			
Current E	mployment:				
elementai	or Volunteer Experience relat ry, secondary), Special Needs ty Recreation, etc.	ed to Schools (public, private, , Health, Social Service,			
Year(s)	Organization / Program	Role			



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I consent to a Criminal Record Check upon admission to the EA Program 🔲 Yes 🔲 N						
Signature:		Date:	<u> </u>			
<u>Sub</u>	omit completed application:					
1.	By Email: rmc@sd42.ca					
2.	By Mail or In Person to the following Ridge Meadows College, Riverside	•				

Applications will be reviewed by a committee of program instructors and college administration. Their decisions regarding applications are final and not subject to appeal.