



WDA Grant - Scholarship Application Form 2024

Date of application: _____

INTERNAL USE ONLY	Date application received by PCU-WHS: _____
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Name: _____

Address: _____

City: _____ Province: **BC** Postal Code: _____

Tel: _____ Fax: _____

Email: _____

Date of Birth: _____

Gender: _____

Citizenship and Residency

Canadian Citizen: Yes No Permanent Resident (Landed Immigrant): Yes No

Other (please specify): _____

BC Resident (proof of residency may be requested): Yes No

Specialized Support Services

Check this box if you would like information on Disability Services sent to you: Yes

Do you identify as an Aboriginal person? Yes

Select one or more of the three options that best describe your Aboriginal identity:

First Nations: Métis: Inuit:

Evidence of Proficiency in English *(To be completed by applicant whose first language is not English)*

a.	4 consecutive years in secondary English in an English-speaking country	
b.	BC English Literature 12 or Canadian equivalent	
c.	Completed international baccalaureate	
d.	A degree or diploma from a post secondary institution in an English-speaking country	
e.	First year of Canadian university English with a grade of C or better	
f.	Canadian Academic English Language Assessment (CAEL) at level 60 or higher	
g.	International English Language Testing System (IELTS) at level 6.5 or higher	
h.	Michigan English Language Assessment Battery (MELAB) at level 80 or higher	
i.	Test of English as a Foreign Language (TOEFL) internet test at level 83 or higher	
j.	Test of English as a Foreign Language (TOEFL) paper test at level 50 in each category	

Post Secondary Education *(if any; Official transcripts will be required)*

Title of Program	Credential awarded	Granting Institution	Date of graduation	GPA

I have: current CRTWC designation
current CDMP designation

completed the DM Practitioner Certificate Program
completed the NIDMAR Online RTW Coordinator program



Work Experience

Please indicate previous work experience (*please include Letters of Attestation for two work experience periods*):

Dates		Job Title	Employing Organisation
From	To		

If you are you currently employed please complete information below:

Organization Information

Name of organization: _____

Address if different from above: _____

Title of applicant: _____

Type of business: Private Public Not for profit

Type of business (industry sector): _____

Number of employees: _____

Does your organization have a disability management program? Yes No

Does your organization have more than one location in BC? Yes No

If so, is your disability management program administered centrally? Yes No

Scholarship Information



PACIFIC COAST UNIVERSITY
FOR WORKPLACE HEALTH SCIENCES

The Scholarship for the Bachelor of Disability Management (BDM) program will be administered by the Pacific Coast University for Workplace Health Sciences (PCU-WHS).

The BDM is a degree with an applied focus that provides graduates with the knowledge, skills, and competencies to assist absent workers to return to work and also to assist employing organizations, service providers, and insurers in the public, private, and not for profit sectors to introduce and operate cost-effective and responsive disability management and return to work programs. Details regarding the program can be found at: <https://www.pcu-whs.ca/programs/bdm/>

The degree is comprised of 120 credits. Scholarship applicants must qualify for **Admission Directly into Year 3 (i.e., the 2+2 BDM program)**:

- with 60 transferrable credits (i.e., having completed a two-year diploma or other educational prerequisites from recognized educational institutions in a range of disciplines);

OR

- on the basis of Prior Learning Assessment and Recognition (PLAR).



Preferred domains of previous study include:

- Human Resources
- Occupational Health and Safety
- Healthcare
- Business
- Social Work

There are two options available for application in the Scholarship program:

- Full-time study in the 2+2 BDM program, to achieve the BDM bachelor degree in two years, for those who are not currently working.
- Part-time study in the 2+2 BDM program, to achieve the BDM bachelor degree in four years, for those who are currently working.

Entrance requirements into the 2+2 BDM program for both pathways described above are the same.

BC residents are eligible for the Scholarship as follows:

- Full-time study: \$6,500 per year for two years, which covers most of the tuition costs to complete the 2+2 BDM program in two years, for those who are not currently working. The applicant must be prepared to participate in the online 2+2 BDM program on a full-time basis for two years.
- Part-time study: \$3,250 per year for the first three years only, which covers most of the tuition costs for the first three years only of four years of part-time study in the 2+2 BDM program, for those who are currently working full-time. The applicant must be prepared to participate in the online 2+2 BDM program on a part-time basis for four years.

The percentage of tuition costs that the annual Scholarship covers will be contingent on the number of transfer credits with which prospective students enter the program.

Please advise under which schedule/classification you are planning to apply:

2 years full-time study 4 years part-time study

Please advise the type of admission for your application:

Flexible Admission to 2+2 BDM, based on a combination of post-secondary education and 5-10 years of work experience in a relevant field (***please complete page 4***)

Admission Directly into Year 3 for applicants who have graduated with an associate degree, 2-year diploma, or other relevant educational prerequisite which provides 60 transferable academic credits

Declaration:

Please indicate below that you:		Yes	No
Are committed to full-time studies for two years for the full-time option			
Are committed to part-time studies for four years for the part-time option			
Have access to computer, high-speed internet, and audio and video			
Are willing to attend an online interview			
Have included 2 Work Experience Letters of Attestation with your application if applicable			
Have ordered official transcripts for post-secondary education if applicable			
<i>I confirm that the information given in this form is true, complete, and accurate.</i>			
Signature		Date	

Please complete and submit form as follows:

By email to: education@pcu-whs.ca

By mail to: WDA Grant Scholarship
Office of the Registrar
Pacific Coast University for Workplace Health Sciences
4755 Cherry Creek Road
Port Alberni, BC V9Y 0A7



This page is to be completed by applicants applying under flexible admission to the 2+2 BDM program on the basis of Prior Learning Assessment and Recognition (PLAR).

Applicants with 60 transferrable credits should not apply under flexible admission.

A combination of professional experience and career education will be assessed under Flexible Admission policy on a case-by-case basis. Applicants under Flexible Admission should have a minimum of 5-10 years of relevant experience in a related field.

The cost of a Prior Learning Assessment and Recognition (PLAR) review for Flexible Admission (\$400) is not covered by the Scholarship.

Flexible Admission Section 1: Workplace or Community Contribution

Describe relevant contributions (if any) that you have made to the field of disability management. This may include publications, reports, presentations, or other life/work experiences.

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Flexible Admission Section 2: Secondary Education (if any)

Date of graduation at an equivalent level to Canadian High School grade 12:		
Name and Contact Details of the secondary institution of graduation:		
Name:		
Address:		
Phone:		Email: <input type="text"/>
Indicate the highest grade level at which you graduated in the following subjects:		
English/Language Arts:		
Mathematics:		
Science:		

Flexible Admission Section 3: Training and Professional Development (attach separate page if needed)

Provide details of all accredited training and professional development courses that you have completed				
Title of Course	Hours of Instruction	Name of Training/Educational Provider	Type of Certificate Achieved	Date of Completion
Select appropriate options below:				
I will submit copies of my certificates to PCU-WHS by: Mail <input type="checkbox"/> Electronically <input type="checkbox"/>				

Flexible Admission Section 4: Resume and transcript

I will provide a copy of my CV/Resume and cover letter to PCU-WHS.	Yes	No
I will organize for an Official Transcript of secondary and/ or post-secondary education studies to be forwarded to PCU-WHS, as applicable.	Yes	No