



#### An initiative of:



## 2019 Membership Application

Please submit your application by e-mail to:

hightechu@csc.uvic.ca

### **Submission Notes:**

Applications must be submitted as a <u>single PDF file</u>

Deadline: 11:59pm on December 31, 2018



# **Membership Application**

General Information (*Mandatory)				
First Name*		Last Name*		
Preferred Name	Birthdate* (DD/MM/YY)	Gender Identity		
Email Address*		Phone Number*		
Home Address (Apt/House #, Street, City, Prov, P	ostal Code)*			
Current High School*		Current Grade*		
Voluntary Declaration				
Beyond a core value, diversity is a cornerstone of Hippersons, regardless of race, gender identity, sexual crole in leading future innovation. We are particularly indigenous youth and members of visible minorities, section is collected to assess our program's progrountary and will not be used in any way that wi	orientation, or socioeconomic status, can dis focussed on helping provide an opportunity gain exposure to the high tech industry and gress toward meeting our commitment to	scover and explore the wo for under-represented gro post-secondary educatio	orld of technology and their oups, such as women, n. <b>The information in this</b>	
If you are a member of one or more of these grou	ps, please check off the appropriate iten	ns below.		
<ul> <li>I am an Indigenous person of Canada: M</li> <li>I am a member of a visible minority (a menon-Caucasian or non-white in colour, remainders)</li> </ul>	ember of an ethnic or racial group other		oles, who are	
Why do you want to be a part of	HighTechU?			
Please share with us why you would like to participate in HighTechU, and your plans following high-school graduation. Your response can be in either (1) written form <i>or</i> (2) video form.				
★ If (1) please limit your response to one	e page, and attach to this submission.			
★ If (2) please limit your response to 1 minute, and share the link via email with <a href="mailto:hightechu@csc.uvic.ca">hightechu@csc.uvic.ca</a>				
Programs(s) of Interest				
Do you plan to access the online Community H	lub resources?	□ Yes	□ No	
Do you plan to apply for the HighTechU Skills A (if you select <b>yes</b> on this question, please complete to	Academy? the supplemental application beginning on p	age 4) □ Yes	□ No	
Do you plan to apply for a HighTechU Summer	Internship?	☐ Yes	□ No	

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#### **Membership Fees**

	ership fee of \$10, payable to the University of on, your fee will be reimbursed. ( <i>Check the bo</i>	
☐ I have paid in person at the Comp	outer Science Office.	
☐ I have mailed a CHEQUE OR MON	IEY ORDER to the following address (DO N	NOT SEND CASH):
HighTechU Department of Computer Scient University of Victoria Engineering & Computer Scient PO Box 1700 STN CSC Victoria BC V8W 2Y2 Canada  I am unable to pay the membersh		J at hightechu@csc.uvic.ca).
Acknowledgements		
1 1 3		
Applicant Acknowledgment		
I hereby acknowledge that I have read information provided within this application	and understand the 2019 HighTechU Program tion is true and correct.	n Guide and, to the best of my knowledge the
Applicant Name (Printed)	Applicant Signature	Date
Parent/Guardian Acknowledgme	nt	
I approve of this application, and ackno	wledge that, to the best of my knowledge the	information provided within is true and correct.
Parent/Guardian Name (Printed)	Parent/Guardian Signature	Date
Relationship to Applicant	⊒ Father  ⊒ Legal Guardian	
Email	Home Phone	Cell Phone
policy. The collection of personal informa Act(FIPPA) and the University Act. The uservices. For a detailed listing of the colle	iniversity uses the personal information for the ection purposes see <u>Schedule A, Procedures</u>	ance with FIPPA and the university's privacy reedom of information and Protection of Privacy e purposes of providing educational and related for the Management of Personal Information on ersonal information please contact the access and

-- End of Membership Application --





### **HighTechU Skills Academy**

### Supplemental Application

General Information (*Mandatory)				
First Name* Last Name*				
Academy Cohort Preference				
Please indicate which cohort of the Academy you are interested in attending (please check all that apply).				
□ Cohort 1: February 2 - March 23 □ Cohort 2: April 6 - June 1 □ Cohort 3: July 6 - August 17				
Why the Academy?				
Please answer question (1) below, and then choose the two questions from (2) to (6) that are most applicable to you to answer. You are encouraged to be innovative with you response: create a website, film a video, compose a song, build an app, design an infographic; the sky's the limit to your personalized application. Video and Audio submissions should be no longer than 2 minutes.  1) Why are you interested in the HighTechU Skills Academy, and how do you think it will benefit you?  2) In a team environment, how do you add value to the group? Please use specific examples  3) Tell us about a time when you had to overcome a challenge or obstacle. How did you do it?  4) Have you completed any projects you are really proud of? What were the projects and why.  5) What is your passion? How do you share your passion with others?  6) Pitch an idea for an app/product/tool that would help solve a problem in your community. How would it work?				
Where can we find your responses? (Choose all that apply)				
☐ Attached to this application ☐ Uploaded to a web service (e.g. YouTube/Vimeo/Google Drive)*				
★ If uploading videos, please ensure they are marked as "Unlisted" and shared with hightechu@csc.uvic.ca				
Dual Credit Consideration (Optional)				
We are currently exploring the possibility of offering CSC 103 for Dual Credit as part of the HighTechU Academy experience, during one or more of the entry points listed above.				
Please check this box if you would be interested in submitting a separate application to be evaluated for Dual-Credit, if offered in 2019 (you will be contacted at a later date with additional information).				
Continued on Next Page				





#### Reference

regarding your application? List name and contact information below				
Name	Email or Phone			
Relationship to Applicant	□ Career/Guidance Counsellor □ Principal □ Teacher □ Other			
Acknowledgements				
Applicant Acknowledgment				

Please provide us with a reference (teacher, guidance/career counselor, school official, or community leader) who we can contact

☐ I understand that should I be accepted into the Academy, I will be required to pay a \$90 administrative fee to demonstrate commitment to the program, and help offset the costs of running the Academy.

I hereby acknowledge that to the best of my knowledge the information provided in this supplemental application is true and correct.

**Applicant Name (Printed)** 

**Applicant Signature** 

Date

#### **Privacy Policy**

The University of Victoria is committed to treating your personal information in accordance with FIPPA and the university's privacy policy. The collection of personal information is in accordance with section 26 of the Freedom of information and Protection of Privacy Act(FIPPA) and the University Act. The university uses the personal information for the purposes of providing educational and related services. For a detailed listing of the collection purposes see <u>Schedule A. Procedures for the Management of Personal Information</u> on the University Secretary's website. Should you have any questions concerning your personal information please contact the access and privacy office at foipp@uvic.ca.

-- End of Supplemental Application --