



Indigenous Entrepreneurship Micro-credential

September 18 - December 4, 2024

Dear Potential Student,

UNBC Continuing Studies is partnering with Pembina to deliver the virtual Indigenous Entrepreneurship Micro-credential program. The Indigenous Entrepreneurship Micro-credential program introduces the principles and practices of entrepreneurship and small business to Indigenous learners.

The program will uniquely explore entrepreneurship as an alternative to typical employment, bringing in successful Indigenous entrepreneurs as guest speakers, who can share their experiences. The learning structure will focus on both academic context and practical experiences, as students explore real-world applications.

We are asking potential students to complete the following survey. We will then evaluate and recommend those that would benef t most from the program and be successful. **Apply by September 6, 2024. Please email your completed form directly to cstudies@unbc.ca**

Please answer the following questions to the best of your ability:

1. Do you self-identify as an Indigenous Person?					
Yes	No				
If yes, please identify	your Indigenous heritage:				
First Nations	Metis	Inuit			
2. At the time of reg	istration for this program,	were you: (please check one)			
Employed	Self Employed	Under/Partially Employed	Unemployed		
4. How would this tr	aining benefit you in the sl	hort term and long term?			

Ph: 250-960-5980





5. Please list your work or experience in the field of entrepreneurship. Or, any business ideas/concepts that you have.
6. What certificates or education do you have that would benefit you in this program?
7. The program does require students to commit at least 10 hours a week (including self-study plus 2-5 hours live Zoom class per week). To attend the live classes, it also requires students to have internet access and Zoom. Would any of these prevent you from fully completing the program? Yes No If yes, please explain:
8. What other educational programs have you completed successfully?
9. Is there anything that would prevent you from completing the program?

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Registration Form - Sponsored Participant

STUDENT INFORMATION					
LEGAL First Name	LEGAL Last Name	UNBC Student # (if applicable)			
Telephone	Cell	Email Address			
Address 1		Address 2			
City/Town		Province	Postal Code		
Date of Birth (MM/DD/YY)		Gender Female Male A gender not listed:	Non-Binary		
PRIVACY AND INFORMATION RELEASE STATEMENT					
Students are advised that the use of information provided on this application form, and other information placed in a student record, complies with the BC Freedom of Information and Protection of Privacy Act, and with the policies and procedures of the University of Northern British Columbia. In addition to internal administrative uses related to student admission, registration and status, student information may also be used in strict confidence in university research and planning. Certain student information is provided on a confidential basis to Partner Instructions, to Statistics Canada as governed by the Canada Statistics Act, and to the BC Government. The internal use of student data to external bodies, respect the absolute confidentiality of student information.					
I authorize the University of Northern British Columbia to share information concerning my registration, participation in the program, and completion records with Pembina.					
I have read and understand the privacy and information release statement.					
Signature:					
Date:					

Please email this completed form by September 6, 2024 to: cstudies@unbc.ca

Ph: 250-960-5980





Information Release Form Sponsorship/Third Party Billing

I	,	
(St	udent's Name)	
authorize the University of	Northern British Columbia – Continuin	g Studies to release to:
	(Third Party Sponsor Name)	
Information regarding my:		
Attendance Academic progress Certificates granted Registration information Contact information durin Bookstore	ng or related to my sponsored program c	of study
All information requested an for managing my account.	d received is deemed strictly confidentia	al and will only be used for administrative purposes
Student Name:		
Signature:		
Date:	(DD-MM-YR)	

Ph: 250-960-5980 unbc.ca/continuingstudies