



**HUMBER**  
School of Social &  
Community Services

## BEHAVIOUR SCIENCE CERTIFICATE PROGRAM

### ADMISSION APPLICATION FORM

#### ***CONTACT INFORMATION***

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

AGENCY: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

#### ***PROGRAM REQUIREMENTS***

To be accepted into this Program, the applicant must meet both educational and experiential criteria:

- A Developmental Services Worker Diploma, or a Diploma in a related field, or a degree in a related field

PLUS

- Work or volunteer experience with people with developmental disabilities *or* being a family member of an individual with a developmental disability

***Proof of these must be submitted with this application.***

**EDUCATIONAL HISTORY**

Please list the degrees or diplomas which you have completed, the name of the educational institution, and date of completion.

**You are required to attach copies of your diplomas and degrees to this application.** Official transcripts are NOT required; a photocopy is acceptable. If you are a graduate of Humber, you do not need to attach proof of your Humber education.

Degree/Diploma	School	Date Completed

Describe any other non-credit training or education in which you have participated which is related to the Behaviour Science Program such as behaviour strategies, dual diagnosis, psychology, etc. Attach any related documentation such as flyers, brochures, certificates, etc.

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**WORK EXPERIENCE**

Please list the jobs you have held working with people who have developmental disabilities, starting with your current employment.

**You are required to attach a letter from your employer to this application which verifies your most recent employment in the developmental services field or a**

*related field.*

Position	Agency	Date Started/Finished

***VOLUNTEER EXPERIENCE***

Please list your volunteer experience with individuals with developmental disabilities, starting with your most recent experience. This includes student placements.

***\* You are required to attach a letter to this application from the organization verifying at least one of your volunteer positions if you are not employed in the developmental services field or a related field.***

Position	Agency	Dates Started/Finished

***FAMILY EXPERIENCE***

Please briefly describe your experiences with an individual with a developmental disability who is a member of your family.

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***The information in this application is correct to the best of my knowledge.***

\_\_\_\_\_  
Signature of Applicant \_\_\_\_\_  
Date

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***INTERNAL USE ONLY***

Applicant is accepted:

Applicant is not accepted for the following reason(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Faculty \_\_\_\_\_  
Date

The information on this application will be utilized to determine your eligibility to the Behaviour Science Program. It will be retained in the office of the Program Coordinator in a locked storage unit. This information will be made available to staff at Humber who are responsible for the administration of the Behaviour Science Program.

***Please return this form and all attachments to:***

Jo Anne Nugent  
Coordinator, DSW Program  
Humber Institute of Technology and Advanced Learning  
Cottage C  
3199 Lake Shore Blvd. W.  
Toronto, Ontario, M8V 1K8