I am writing to extend my heartfelt gratitude to Discovery College, the BC Career College Association and everyone involved with the Practical Nursing Access program. Reflecting on the past year, my educational journey has not only been enriching but also transformative, guiding me to a career that I am passionately embracing today.

When I first enrolled in the program, I was uncertain about my future direction in nursing. I initially thought I might return to long-term care, a familiar field for me. However, my experiences during the course, particularly my involvement with the Aids Vancouver Island crew during our clinical day and the exposure to the community in Campbell River, were pivotal. These experiences opened my eyes to my previously unrecognized biases and provided me with a new, beautiful outlook on life.

This newfound perspective led me directly to my current role as an addictions nurse—a field I had not considered before but now find incredibly fulfilling. Each day, I see firsthand how addiction affects individuals from all walks of life, including first responders, doctors, teachers, and nurses. This has profoundly changed my understanding of addiction and reinforced the importance of compassion in healthcare.

Working at Edgewood Treatment Centre, where I secured a full-time position even before completing my program, has been a blessing. The environment here is supportive and dynamic, allowing me to contribute meaningfully to the recovery process of many. I feel privileged to be able to impact not only my patients but also my family and friends, helping shift negative perceptions about addiction that many of us grow up with.

The knowledge and experiences I gained through the Practical Nursing Access program have been invaluable. I am making a significant difference in people's lives daily, which has brought me immense satisfaction and joy.

Please pass along my thanks to everyone who has supported and guided me through this incredible journey.

Julia Tindale

Iulia Tindala (Apr. 15, 2024 13:21 DDT)

Testimonial Consent and Release CWRG Program

The personal information referred to in this form is collected by His Majesty the King in right of the Province of British Columbia (the "Province") as represented by the Minister of Post-Secondary Education and Future Skills ("PSEFS") under the authority of Sections 26 (c) and (e) of the British Columbia *Freedom of Information and Protection of Privacy Act*. Your personal information will be used by PSEFS, PSEFS's service providers, and associates of those service providers in relation to the provision, administration, and promotion of training programs funded by the Province and/or the Government of Canada through the Canada - British Columbia Workforce Development Agreement (the "Training"). If you have any questions about the collection of your personal information, please contact: Executive Director, Employment and Training Programs, P.O. Box 9189 Stn. Prov Govt, Victoria, B.C. V8W 9E6.

Lindsay.McLaughlin@gov.bc.ca

Consent

Effective from the date that I complete and submit this form to PSEFS until such time as I inform PSEFS that I have revoked my consent, I hereby consent to PSEFS's disclosure of my personal information, as specified below, to the general public inside or outside of Canada, including by way of the Internet, for the purpose of publicizing or promoting the Training, whether in brochures, newsletters, fact sheets, news articles, posters, audio or visual materials, on internal or external websites, or in any other format or medium.

I understand that "personal information" in this context includes: my name, photo(s) and/or video(s) of me, and any testimonials and/or "success stories" about me in relation to my participation in the Training, including any outcomes resulting directly or indirectly from my participation in the Training.

My consent is subject only to the following restrictions (check any that apply):

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Identify me using my first n	ame only	Exclude photos of me
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If the subject of the Photographs/Videos/Testimonials is a person under the age of 19, whose name is Print] (the "Minor"), I represent and warrant that I		
am at least 19 years of age and I have the authority to, and I do hereby, agree in conjunction with or for and on behalf of the Minor, as well as myself, to all of the terms and conditions contained in this Consent and Release.		
ACKNOWLEDGE AND AGREE THAT TYPING MY NAME BELOW OR INSERTING ANOTHER FORM OF ELECTRONIC SIGNATURE HAS THE SAME LEGAL EFFECT AS EXECUTING THIS AGREEMENT UNDER A HAND-WRITTEN SIGNATURE.		
SIGNED AND DELIVERED THIS _	DAY OF	, 20 Apr 15, 2024
Iulia Tindale	Julia Tindale Julia Tindale (Apr 15, 2024 13:31 PDT)	
Print Name	Signature	Signature of Minor

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