

Work Experience (WEX12) Application

Employment/Educational Opportunities

Work experience is designed to prepare students for the transition from Secondary school to the world of work or further training and education. It provides an opportunity for students to connect what they learn in the classroom with the skills and knowledge needed in the workplace and in society in general. Work experience allows students the opportunities to observe and practice the employability skills and attitudes required in the workplace, while exploring possible careers in their chosen focus area. In addition, Work Experience allows students to develop self-reliance, self-direction, and the self-confidence necessary for effective teamwork, life-long learning and workplace success.



Requirements for program admission:

Students must be 14 years of age or older, attending high school and willing to complete 100 hours of Work Experience (paid or unpaid). To qualify, students must complete this application package, including parent/guardian signatures. To ensure course credit and completion, it is essential that students return all documentation including self-reflections, training plans, placement agreements, term reports, and work-based training record.

Courses to be taken at high school:

COURSE	CREDITS	GRADE	REQUIREMENTS
WEX 12A	4	Grades 11, 12 school year	100 hours of work experience
WEK 12B	4	Grades 11, 12 school year	100 hours of work experience

In order for credit to be earned, students must complete placement hours and submit all assignments and forms. Students must complete WEX12A before starting WEX12B. Credits for paid or non-paid work experience that occurred in the past is not permitted. (No back-dating)

Student Name: _			
Date:			

Work Experience 12A & 12B

Applicant: keep this form for your records



Application Requirements

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Applicants must meet the following requirements:				
	Be in Gr. 11 or Gr. 12 at the start of program. Be registered in a Chilliwack School District school.			
Ste	p 1:			
	Submit completed Chilliwack School District Career Programs application package (requires both student and parent signatures).			
	Submit a current Resume and Cover Letter.			
	☐ Package can be submitted to your Work Experience Facilitator/office.			
Step	2:			
Whe	n the application package has been processed, students will be contacted regarding the following requirements:			
	Workplace Safety Package			
	Placement Request Form(s)			
	Work Experience 12 Training Plan (to be completed before hours to be worked)			
	WEX12 Work Term Report			
	Student Reflection			

Only complete application packages will be processed.

Career Programs Application



Name: _			
Current	Grade		
	ITA YOUTH TRAIN IN TRADES		ITA YOUTH WORK IN TRADES
	Automotive Service Technician		Specify trade
	Hairstylist		REGIONAL CAREER PROGRAMMING (RCP) - UF
	Welding		Specify Course Option:
	WORK EXPERIENCE		
	WEX 12A		
	WEX 12B (Must complete WEX 12A first)		
l,			do hereby declare that I will:
AdhBe in	nere to the School District Code of Conduct nere to the School Code of Conduct n attendance at all courses ntain passing grades in all courses		
	are that this program is a challenging opportunity wack School District.	and am wi	lling to abide by the rules set forth
Student'	's Signature	Parent's	Signature
Date:		Date:	

District Career Programs Registration



STUDENT INFORMATION	
Legal Last Name	
Usual Last Name	
Preferred First Name	
Home Phone	CELL Phone
Student email (please print clearly)	CELL FIIONE
	Grade
IMMIGRATION/CITIZENSHIP STATUS	
International Student □	
ADDRESS INFORMATION	
Street Address	
Apt No	City
Province	Postal Code
Mailing address (if different from above _	
*I have an IEP (Individualized Education Pl PARENTS/GUARDIANS First Contact	
Relationship to student	
	First Name
	Work Phone
Cell phone	
Second Contact	
Last Name	First Name
Address (if different than student)	
Home Phone	Work Phone
Cell phone	Email
Are there any legal documents in force results of the so, please explain briefly	
Have you provided a copy of these legal d	ocuments to the school? Yes No

District Career Programs Registration



Dr Name	Phone
Care Card No.	_
Allergies and Conditions	
Are any of these conditions life threatening?	Yes □ No □ If so, which?
Life Threatening Conditions/Medications or Tre	eatment Required:
Condition	Treatment
available at the school office or on the District website).	Medication to Students, and AP 330 – Allergic Shock (Anaphylaxis). Copies are
Parent/Guardian Name:	Signed:(Parent/Guardian)
	(Parent/Guardian)
It is expected that students conform to district dres requirements (e.g. Trade specific, Professional office and Students)	ce attire, Personal Protective Equipment, Uniform)
Date: Student	Signature:
consent to use personal information for purposes of below if you authorize disclosure as described.	d Protections of Privacy Act, Chilliwack School District requires unrelated to educational programs. Please sign for each item email and phone number to school district personnel to meetings or school related activities.
Date: Student	Signature:
educational program. In addition, your child's nam yearbook, school newsletter or brochure, school vi	rative and identification purposes consistent with providing arne, photograph and comments may be published in the schood deo or in a district annual report, calendar or website.
	h and comments for purposes consistent with the above.
Date: Parent/	Guardian Signature:
parental consent. However, at various times throu	r in school yards during school hours without student or aghout the school year, the school may invite spectators — ts (school play, concert, sporting event, special classroom
I consent to the publication of my child's name, ph consistent with the above.	otograph and comments in the news media for purposes
Date: Parent/	Guardian Signature: