



## 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.

To qualify students must complete an application package, including parent/guardian signatures in addition to selecting a focus area to complete their placement hours in. Students are encouraged to complete one-week placements in order to gain authentic insight into their chosen career focus area. To ensure course credit and completion, it is essential that students return all documentation including self-evaluations.

### 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 addition to the placement hours, students will be required to submit additional assignments as requests by the Work experience teacher. Failure to do so may result in the inadmissibility of hours worked for credit. Students must complete WEX12A before starting WEX12B. Credits for paid or non-paid work experience that occurred in the past, is not permitted.

## Application Requirements

***Applicant: keep this form for your records***

Applicants must meet the following requirements:

- Be fourteen years of age or older at start of the program.
- Be registered in a Chilliwack School District school.

### Step 1:

- Submit **completed** Chilliwack School District Career Programs application package (requires both student and parent signatures).
- Submit a current Resume and Cover Letter.
- Include a copy of your most recent report card.

**Package can be submitted to your high school counselor.**

### Step 2:

When the application package has been processed, students will be contacted regarding the following requirements:

- Students must fill out a placement request form.

**Only complete application packages will be processed.**

**Have you attached your most recent REPORT CARD to your application package?**

# Career Programs Application



Name (please print clearly) \_\_\_\_\_

Current Grade \_\_\_\_\_

## ITA YOUTH TRAIN IN TRADES

- Automotive Service Technician
- Carpenter
- Dairy Production Technician
- Hairstylist
- Horticulture
- Professional Cook 1
- Welder

## ITA YOUTH WORK IN TRADES

Specify trade \_\_\_\_\_

## UNIVERSITY TRANSITION - UFV

- Community Support Worker
- Health & Human Services

## REGIONAL CAREER PROGRAMMING (RCP)-UFV

Specify Course Option: \_\_\_\_\_

## WORK EXPERIENCE

- WEX 12A Focus Area \_\_\_\_\_
- WEX 12B Focus Area \_\_\_\_\_

I, \_\_\_\_\_ do hereby declare that I will:

- Adhere to the School District Code of Conduct
- Adhere to the School Code of Conduct
- Be in attendance at all courses
- Maintain passing grades in all courses

I am aware that this program is a challenging opportunity and am willing to abide by the rules set forth by Chilliwack School District.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Parent's Signature

# District Career Programs Registration Form



Chilliwack  
School District

## STUDENT INFORMATION

Legal Last Name \_\_\_\_\_

Legal First Name \_\_\_\_\_

Usual Last Name \_\_\_\_\_

Preferred First Name \_\_\_\_\_

Legal Middle Name \_\_\_\_\_

Birth Date (Day/Month/Year) \_\_\_\_\_

Home Phone \_\_\_\_\_

CELL Phone \_\_\_\_\_

Student email (please print clearly) \_\_\_\_\_

Home School \_\_\_\_\_

Grade \_\_\_\_\_

## IMMIGRATION/CITIZENSHIP STATUS

International Student

## ADDRESS INFORMATION

Street Address \_\_\_\_\_

Apt No \_\_\_\_\_ City \_\_\_\_\_

Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Mailing address (if different from above) \_\_\_\_\_

The principal of a school may request a properly sworn Statutory Declaration from the enrolling parent or legal guardian attesting that the student's principal place of residence is the place indicated in this application. Applicants should note that making a false statutory declaration may constitute the criminal offence of perjury, contrary to Section 131 of the Canadian Criminal Code.

## PROGRAM

Have you had learning assistance in middle or high school? Yes  No

ELL (English Language Learner)

Special Education  – which program? \_\_\_\_\_

\*I have an IEP (Individualized Education Plan)

## PARENTS/GUARDIANS

### First Contact

Relationship to student \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Address (if different than student) \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell phone \_\_\_\_\_ Email \_\_\_\_\_

**Second Contact**

Relationship to student \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Address (if different than student) \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell phone \_\_\_\_\_ Email \_\_\_\_\_

Are there any legal documents in force re custody/guardianship/access? Yes  No

If so, please explain briefly \_\_\_\_\_

Have you provided a copy of these legal documents to the school? Yes  No

**MEDICAL INFORMATION**

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 Treatment Required:

Condition \_\_\_\_\_ Treatment \_\_\_\_\_

(AP 327 – Medical Alert Conditions, AP328 – Administration of Medication to Students, and AP 330 – Allergic Shock (Anaphylaxis). Copies are available at the school office or on the District website).

Name (printed) \_\_\_\_\_ Signed \_\_\_\_\_  
(Parent/guardian)

**STUDENT INFORMATION RELEASE**

In accordance with the Freedom of Information and Protections of Privacy Act, Chilliwack School District requires consent to use personal information for purposes unrelated to educational programs. Please sign for each item below if you authorize disclosure as described.

I give my consent for release of my name, address, email and phone number to school district personnel to enable them to contact me regarding school issues, meetings or school related activities.

Signature \_\_\_\_\_

**Student Images**

Your child’s photograph may be used for administrative and identification purposes consistent with providing an educational program. In addition, your child’s name, photograph and comments may be published in the school yearbook, school newsletter or brochure, school video or in a district annual report, calendar or website.

I consent to the use of my child’s name, photograph and comments for purposes consistent with the above.

Signature \_\_\_\_\_

Students cannot be photographed in classrooms or in school yards during school hours without student or parental consent. However, are various times throughout the school year, the school may invite spectators – including parents or media – to certain school events (school play, concert, sporting event, special classroom activities).

I consent to the publication of my child’s name, photograph and comments in the news media for purposes consistent with the above.

Signature \_\_\_\_\_

# Statements of Interest and Intent



**Application to this program is a competitive process. Please give detailed answers**

Name: \_\_\_\_\_

Program: \_\_\_\_\_

Career Goal: \_\_\_\_\_

1. What have you done to prepare yourself for study in this area (i.e. course work, extra-curricular activities, reading, interviewing people, etc.?)

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2. What have you done to prepare yourself for work in this area (i.e. volunteer work, work experience, job shadow, related job or transferrable job skills, interviewing people, etc.?)

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3. What skills do you have that will help you be successful in this program? \_\_\_\_\_

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4. What interests you about a career in this field? \_\_\_\_\_

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5. What knowledge do you have of this career field? (i.e. opportunities for work, working conditions, wages, etc.?)

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6. What will you do to ensure your success in this program? Speak specifically to attendance, work habits, academic achievement and work experience.

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7. What are your interests outside of school? (hobbies, sports, clubs, special talents, etc.)

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8. Please explain any absences/lates you have this school year \_\_\_\_\_

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# Teacher Reference Form

(academic or program elective teacher)



**CONFIDENTIAL** - Please complete the reference and submit in a **sealed** envelope to secondary school counsellor.

Student: \_\_\_\_\_  
Last Name First Name

Course you taught this student: \_\_\_\_\_ Grade: \_\_\_\_\_

This student has applied for a seat in the \_\_\_\_\_ Program.

1. The program this student is applying for is academically rigorous. The student must be self motivated and able to apply the theory knowledge to their practical work. The ability to think critically is essential to the students' success.

**Do you feel the student applying can meet these criteria?**

YES                       POSSIBLY                       NO

2. Could this student be counted on to represent the school district favorably in a business/employer setting?

YES                       POSSIBLY                       NO

3. Do you feel this student has a sincere interest in this District Career program?

YES                       POSSIBLY                       NO

4. Please help by providing frank comments about this student. This will aid in the selection of appropriate candidates for this program.

	Excellent	Good	Satisfactory	Needs Improvement
Maturity				
Accuracy/ability to follow instructions				
Enthusiasm and interest				
Adaptable – adjusts to new situations				
Follows through on assigned tasks				
Attendance				
Punctuality				
Shows motivation to learn new skills				
Can work independently				
Has positive attitude towards work				
Accepts constructive criticism				
Makes changes as a result of constructive criticism				

Evaluation completed by: \_\_\_\_\_ Phone #: \_\_\_\_\_

School: \_\_\_\_\_ Signature: \_\_\_\_\_



