School District No. 83 (North Okanagan-Shuswap)
Youth TRAIN in Trades Application

Dual Credit Program Application Checklist

Items 1 – 13 must be completed fully by student before application will be accepted

Student Name:_____ School: _____

1. ☐ Completed application form signed by parent/guardian
2. ☐ Student Education/Transition Plan (refer to the attached document)
3. ☐ One (1) page personal letter explaining your reasons for applying.
4. ☐ One (1) letter of reference from employer or family friend (not family member) (refer to attached form)
5. ☐ One (1) letter of recommendation from a teacher (refer to attached form)
6. ☐ Safety Activity (refer to the attached activity)
7. ☐ Research Activity (refer to the attached activity)
8. ☐ Career Interview Activity (refer to the attached activity)
9. ☐ Essential Skills at: http://ita.essentialskillsgroup.com completed and assessment page attached: (use your school login for username and password request)
10. ☐ Resume
11. ☐ A copy of birth certificate
12. ☐ ITA Youth TRAIN in Trades Registration form (refer to the attached document)
13. ☐ On-line Application to College (if applicable) (fee based)
14. ☐ Successful completion of College Entrance Exam (if applicable) (fee based) *
15. ☐ If applicant is of Indigenous decent, school based Indigenous support workers and appropriate band personnel have been notified of students' interest in program.

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1. ☐ Attendance Report from past 2 years
2. ☐ Current Transcript
3. IEP or Psyche Ed designation ____yes ____no (attach any documents)
4. ☐ College Permission Release Information form (if applicable)

School Administration (signature) check: _____Date_____
Comments: _____
_____
_____

"School-based" Career Staff (signature): _____
Date_____

Once the application has been handed into the Career Centre, the following will take place:

_____ Date Exam written Math %_____ English % _____
("Passing" percentage varies according to the trade)
_____ Date of a successful interview
_____ Possible job shadow depending on trade/career area
_____ Date documents sent to the District Career Office
_____ Official letter sent to student regarding acceptance, conditions and fees

****Programs are offered subject to all required SD83 and - where applicable - college approvals, including sufficient enrolment, funding, and staffing.**

(Please print clearly and fill in <u>ALL</u> information)

1. School _____ Current Grade _____ Date _____

2. Student Name _____
(Last) (First) (Middle)

Mailing Address: _____

City: _____Postal Code: _____

Student E-mail: _____

Parent Email: _____

Home Phone: _____ Student Cell Phone (if applicable): _____

Parent Cell Phone (if applicable):_____

Social Insurance Number: _____ Date of Birth: _____

PEN _____ Expected Graduation Date (i.e. June 2023) _____
(Obtain from school secretary)

Do you identify yourself as an Indigenous person? ☐Yes ☐No Name of First Nations Band: _____

3. ***TICK* (√) the program that you are applying for**:

☐ Automotive Service Technician @ TBA (February 2023)	☐ Automotive Collision (Autobody) @ ALF (February 2023)	☐ Hairstyling (Cosmetology) @ PVS (February 2023)	☐ PC1 (Cook Training) @ ALF (February 2023)

☐ Other Programs (i.e. Welding, Electrical, Plumbing): _____

Intake date (i.e. August 2023): _____

Post Secondary Institution (i.e. OC, TRU): _____

***for more details on the above programs (and more), visit the Career Centre at your school and/or http://career.sd83.bc.ca/

1. Do you have a medical condition which may affect your success in this program or that your instructor should be aware of? Circle **Yes or No**. If you answered "Yes", please explain below.

_____

_____

2. Do you have an IEP or learning condition which may require special assistance? Circle **Yes or No**. If you answered "Yes", please explain below.

_____

_____

"Dual Credit Understandings"

We have discussed this program with my son/daughter and give permission for him/her to participate in this dual credit program.

We certify the information given in this application is true and complete to the best of our knowledge and understand that, if selected for a Career Program; falsified statements may be reason for removal.

We understand that ***tuition only will be paid*** on our behalf by School District 83. SD83 will act as our sponsor for this program. **Students** will, however, be **expected to purchase text books and other supplies and pay any other fees required.**

We authorize investigation of all statements contained herein and the references listed in this application.

We allow the Career Program to use any program related picture of my son/daughter for the purpose of promotion and communications for the Program.

We understand that all students attending dual credit program are expected to make a sincere effort to gain full benefit from their training. In order for this to occur, regular attendance, punctuality, safe work practice and progress at an acceptable rate are necessary to maintain enrolment and to ensure success in the program.

By signing below, we acknowledge that we have read and agree to the* "Dual Credit Understandings" *stated above.

_____ _____

Student Signature Date

_____ _____

Parent/Guardian Name (please print) Date

_____

Parent/Guardian Signature

STUDENT EDUCATION/TRANSITION PLAN

TODAY'S DATE: _____ STUDENT NAME: _____

SECONDARY SCHOOL: _____STUDENT GRADE: _____

Grade 10: English/Socials/Science/Math/PE/Planning **Have these requirements been met/or are in progress? Circle: YES or NO**

Grade 11: English/Socials/Science/Math required

SEMESTER ONE	SEMESTER TWO

Grade 12: English 12 or Communications 12 required

SEMESTER ONE	SEMESTER TWO

Transition Courses (i.e. PSIQ 12A)	When Taken (i.e. September 2018)	Location (i.e. Vernon)	Institution/Employer (i.e. Okanagan College)

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

STUDENT SIGNATURE: _____DATE: _____

CAREER CO-ORDINATOR/COUNSELLOR SIGNATURE: _____DATE: _____

Dual Credit Application: Research Activity

Answer the following questions based on your research associated with your interested trade. MyBluePrint (myblueprint.ca/SD83) is great resource to use when completing this activity, as well as the ita's Essential Skills Group (http://ita.essentialskillsgroup.com) website.

1. Describe the trade. What are some of the jobs/tasks that you would do as this type of tradesperson?

2. What high school courses would help you get into this career?

3. What salary can you expect to get from this trade?

4. What is the "future potential" of this trade in terms of employment? For example, will there by many jobs in this trade in the future?

5. Based on your research, are you still interested in this career? Why?

Dual Credit Application: Safety Activity

Your Rights and Responsibilities: You have the right to refuse work if you have reasonable cause. Do not stop working or go home! Report any problems immediately to your Youth TRAIN in Trades instructor.

Circle or highlight any hazards below that may be present in your work placement.

Office Work and Civil Service (Including: Medical, Veterinarian, Nursing, Teaching…) Slips, trips and falls Improper use of equipment Faulty equipment Lifting Human conflict situations	**Hospitality or Culinary Arts** (Chef, Hotel Management…) Burns Lifting Cuts with knives Working with slicers Bio-hazards
Construction Trades (Carpentry, Cabinet Making, Construction, Plumbing, Sheet Metal, Electrical…) Power tools (skills saw…) Fall from heights Objects falling from above Stepping on nails Electric shock	**Industrial Trades** (Welder, Mechanic, Machinist, Pipe Fitter, Steel Fabricator…) Power Tools: bench/angle grinders, lathes, tire machine… Falling objects Chemical burns Eye injury (arc welding/flying particles) Improperly lifting vehicles on jacks/hoists

Common Hazards:

Faulty equipment Trip hazards Reaching/lifting
Falling/flying debris Electric shock Clothing snags
Eye injuries Equipment left running Fumes
Drowning Improper lock out

Dual Credit Application: Career Interview Activity

Find someone in the career field in which you have researched. Ask the following interview questions. You can contact a tradesperson using the following means:

- Contact them in person, on the phone or by email. (this is the ***PREFERRED*** interview method)
- Go on to myBluePrint and search an occupation. Many occupations have posted interviews and feature "A Day in the Life" videos of various trades.

What is your trade or occupation?

What are some of your job duties and responsibilities?

What are some of your "likes" of your job?

What are some of your "dislikes" of your job?

What are some of the safety factors concerning this occupation?

What is some advice you would give me on pursuing this as a career?

==========

Name of Person Interviewed: _____

Date of Interview: _____

Teacher Reference Form

Student Name (first and last): _____

Course(s): _____

Grade: _____School: _____

This student has applied for a seat in: _____

Please provide frank comments about this student.

Please check the following traits as:	Excellent (4)	Good (3)	Satisfactory (2)	Needs Improvement (1)
1. Maturity				
2. Ability to follow instructions				
3. Enthusiasm and interest				
4. Adaptable – adjusts to new tasks				
5. Follows through on assigned tasks				
6. Attendance				
7. Punctuality				
8. Shows motivation to learn new skills				
9. Can work independently				
10. Has positive attitude towards work				
11. Accepts constructive criticism				

Comments:

_____

_____

_____

_____

_____

(feel free to write an additional letter of reference)

Teacher Reference completed by:

Name: _____ Phone No.: _____

Signature: _____

Employer/Community Reference Form

Student Name: _____

This student has applied for a seat in: _____
(student to write down the name of the program)

Name of Business: _____ Phone No.: _____

Name of Employer: _____ (please print)
Signature of Employer: _____

Or

Name of Community Member: _____ (please print)

Signature of Community Member: _____ Phone No.: _____

Please provide frank comments about this student. Only "tick" the traits that are applicable to your relationship with the student.

Please check the following traits as:	Excellent (4)	Good (3)	Satisfactory (2)	Needs Improvement (1)
1. Maturity				
2. Ability to follow instructions				
3. Enthusiasm and interest				
4. Adaptable – adjusts to new tasks				
5. Follows through on assigned tasks				
6. Attendance				
7. Punctuality				
8. Shows motivation to learn new skills				
9. Can work independently				
10. Has positive attitude towards work				
11. Accepts constructive criticism				

Comments: _____

_____

_____

_____

_____

(Feel free to write an additional letter of reference)

ITA Customer Service
800 - 8100 Granville Ave.
Richmond, BC V6Y 3T6
Tel: 778-328-8700
Toll Free: 1-866-660-6011

Youth Train in Trades Registration Form

Please complete and return this form to your district career coordinator. All *mandatory fields must be completed.

A. Student Information

***Legal First Name**:	Legal Middle Name (s):	***Legal Last Name**:
***Date of Birth (MM/DD/YYYY)**:	***Gender**: ☐ Male ☐ Female	Personal Education Number (PEN):
***Suite Number**:	***Mailing Address**:	
***City**:	***Province**:	***Postal Code**:
***Primary Phone Number**: ( )	Secondary Phone Number: ( )	***Email Address:**
Do you agree to receiving updates via SMS to your primary phone number? ☐ Yes ☐ No		
***Do you identify yourself as an aboriginal person?** ☐ Yes ☐ No First Nations ☐ Métis ☐ Inuit ☐		

B. Parent/Guardian's Information

I, _____

(print surname followed by given names of **parent/guardian**)

of _____ _____

(street address) (city, town) (postal code)

Declare that:

1. I am the ☐ custodial parent ☐ legal guardian of the minor named above; and,

2. I authorize the school to release the information outlined in Sections A & B to Industry Training Authority for the purpose of registering the student with the ITA in a Youth Trade program; and to use the registration information for statistical data.

3. I understand that I can only withdraw this consent by written request addressed to the school.

Student's Signature:	**Date (MM/DD/YYYY)**
Parent/Guardian's Signature:	**Date (MM/DD/YYYY)**
SD/Independent Board Authority Contact's Signature	**Date (MM/DD/YYYY)**

C. Program Information (To be completed by School District or Independent Board Authority)

Program Type (Select one): ☐ Level 1 ☐ Foundation	TRAIN Intake (MM/YYYY):	Program Start Date (MM/DD/YYYY):	Program End Date (MM/DD/YYYY):
***Trade Name:**			

The Industry Training Authority is an agency of the Government of British Columbia.