



Apprenticeship Program Application

Circle the one you are applying for!
Carpentry / Chef / Plumbing / Or:

Student Application Requirements and Checklist:

- Step #1: Completed Student Application Information
- Step #2: Completed Student Profile/Questionnaire
- Step #3: Complete Reference Form
- Step #4: Attach an up-to-date **resume**
- Step #5: Contact Ms. Crosby to sign up for an interview & attend the interview
- Step #6: Wait for a letter accepting you into the program, putting you on a wait list or declining your application

A parent/guardian is encouraged to attend the interview but it is not mandatory. The interview will last about 15 minutes. Please be on time as other students are scheduled.

Name of student: _____

Date of interview: _____

Time of interview: _____

Location of interview: _____

If you are unable to attend the interview, please email (kcrosby@sd40.bc.ca) at least 1 day before the interview date so other arrangements can be made. Failure to attend the interview may result in your withdrawal from the selection process.

Step #1: Apprenticeship Program Application

To participate in this program, a student must:

- Have successfully completed all Grade 10 graduation credits
- Be 15 years of age or older but younger than 19
- Be registered as a student in School District #40 (New Westminster)
- Have parent/guardian support and permission
- Be responsible for his/her own transportation arrangements to the program site
- Have an interest in learning more about an apprenticeable trade
- Have a Social Insurance and a PEN Number
- Meet academic requirements for entry into technical training at a post secondary institution (see Course Selection Booklet online at nwss.ca)
- Understand that the academic requirement to complete this program is 70% (50-69% earns only high school course credit)
- Complete this application package

If your application is accepted:

| | |
|--|---|
| <ul style="list-style-type: none"> • I understand that my acceptance into this program is contingent upon my completion of the Package and a successful interview with School District #40 staff. | <ul style="list-style-type: none"> • I am committed to the full and active participation in a work experience (unpaid job) and/or Youth Work in Trades (paid job) program. |
| <ul style="list-style-type: none"> • I understand I will be covered by the Workers Compensation Act for the dates and times that I am placed with an employer. | <ul style="list-style-type: none"> • I will seek assistance from my Career Programs Coordinator and counsellor to ensure I meet all program requirements. |
| <ul style="list-style-type: none"> • I, along with my parent/guardian will attend all New Westminster School District meeting(s) for all students accepted in the this program to discuss various aspects of the program. | <ul style="list-style-type: none"> • I agree to conduct myself in a professional and responsible way in the workplace and classroom. |

Signature of Student

Signature of Parent/Guardian

Printed name of parent/guardian

Cell or landline phone #

Email



Step #1 continued: Student Application Information

| | | | |
|---------------|--------|--------------|--|
| Student Name: | | Birth Date: | |
| Address: | | Postal Code: | |
| City: | | | |
| School: | | Grade: | |
| Cell # | | Student # | |
| Phone: | Email: | | |

Check one: Yes No

I hereby grant permission to Board of Education of School District No. 40 (New Westminster) personnel to take photographs or video footage of my son/daughter while on work experience or in the classroom. These pictures may be used by Career Programs or BCIT/VCC/PIC in publications, newsletters, calendars and on the website at anytime for purposes of program promotion and celebration of student successes.

MEDICAL INFORMATION

| | | |
|--|----------|--------|
| Family Dr: | Address: | Phone: |
| Food Allergies: | | |
| Drug Allergies: | | |
| List all medical conditions: | | |
| | | |
| List any injuries or illnesses affecting physical activity: | | |
| | | |
| Have you been under a Dr's care to ANY reason within the preceding 2 years? If so, explain | | |
| | | |
| Are you currently on any medication? If yes, outline type, dosage & reason | | |
| | | |
| Describe any medical/physical problems that might affect performance (i.e. epilepsy, diabetes, etc.) | | |
| | | |
| | | |



Step #2: Student Profile/Questionnaire

Please answer the following questions:

1. Why do you wish to take part in this program?

2. What skills, talents, strengths and interests do you have that relate to this field?

4. What experiences have you had that lead you to feel this career is suited to your personality style (volunteer experience, related jobs, extra curricular activities, etc.)?

4. Describe your attendance record at school in the past year:

5. Discuss your outside-of-school commitments during this program:

6. What are your long-range career goals?

7. Do you have contact with an employer in this field who might hire you? If so, print contact information for this person here: _____



Step #3: Apprenticeship Program Reference Form

Ask one of the following people to fill out this reference form for you:

- Tech Ed. Or Home Ec. Teacher
- Teacher / Counsellor
- Employer
- Coach

Student's name: _____

This student is applying for an NWSS Apprenticeship Program. Please assist in the selection process by providing the following information about the student and by giving honest **comments** that will assist in the placement of those students who might benefit from such a program.

How long have you known this student? _____

In what capacity do you know this student? (example: teacher, coach, employer) _____

This student demonstrates:

| | Always | Usually | Sometimes | Seldom | Never | N/A |
|---|-----------|---------|-----------|-------------------|-------|-----|
| Positive attitude and is enthusiastic to learn and participate. | | | | | | |
| Willingness to take initiative. | | | | | | |
| Ability to be cooperative and work well with others. | | | | | | |
| Honesty, and respects confidentiality. | | | | | | |
| Ability to accept constructive criticism and change behavior accordingly. | | | | | | |
| Attentiveness and is able to listen and follow directions. | | | | | | |
| Ability to speak clearly and audibly. | | | | | | |
| Ability to concentrate on the tasks assigned in a safe manner. | | | | | | |
| Ability to complete projects within time lines. | | | | | | |
| Reliability (attends regularly and on time). | | | | | | |
| | Excellent | Good | Average | Needs improvement | | |
| Overall Attitude: | | | | | | |

Can this student be counted on to represent the school district favourably in a community or work setting? YES NO

Other comments: _____

Reference completed by (printed name and signature): _____

Company/Organization: _____

Contact phone number: _____

