



## SUMMER SCHOOL COOPERATIVE EDUCATION STUDENT APPLICATION FORM

Student Name \_\_\_\_\_ OEN Number \_\_\_\_\_ Grade \_\_\_\_\_

Number of days absent Semester 1: \_\_\_\_\_ Number of days absent Semester 2 (to date): \_\_\_\_\_  
Date of Birth (DAY/MONTH/YEAR) \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_

Home Phone Number \_\_\_\_\_ Student Cell Phone Number \_\_\_\_\_

Student Email \_\_\_\_\_ Can the Cooperative Education teacher contact via text? Yes  No

### Parent(s)/Guardian Information:

Name \_\_\_\_\_ Daytime Phone Numbers \_\_\_\_\_

Name \_\_\_\_\_ Daytime Phone Numbers \_\_\_\_\_

## COOPERATIVE EDUCATION PLACEMENT REQUEST

Are you involved with a Specialist High Skills Major Program? No  Yes  Which One \_\_\_\_\_

Which secondary school do you currently attend? \_\_\_\_\_

Total number of credits earned as of June in the current school year \_\_\_\_\_

### List your Summer Cooperative Education placement:

Name of Firm \_\_\_\_\_ Contact \_\_\_\_\_  1 credit  
110 hours

Address \_\_\_\_\_ Phone \_\_\_\_\_  2 credits  
220 hours

## PARENT/GUARDIAN APPROVAL

Students can earn credit toward their OSSD through Cooperative Education. It is a requirement of Cooperative Education that students complete this formal application.

### Parents/guardians and students should be aware that each candidate for Cooperative Education:

- Is responsible for transportation
- Will be expected to adhere to placement health and safety regulations
- May require specific medical tests or vaccinations for some placements
- Must participate in pre-placement and integration modules and the Cooperative Education placement as scheduled to earn a credit
- Is expected to represent the school in a positive way that involves meeting all placement expectations
- Is covered by The Workers' Compensation Act or Board of Education insurance. Additional insurance coverage is available to all students at the beginning of each school year.
- Should not expect financial remuneration upon completion of the work placement agreement.

Guidance Counselor Signature \_\_\_\_\_

Guidance please provide the Cooperative Education Course Link: \_\_\_\_\_  
(SHSM LINK MUST BE ON PATHWAY CHART OR USE GLC20C1 CAREER STUDIES)

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

### EMERGENCY MEDICAL INFORMATION

**Emergency Response Plan:** If your child has any medically diagnosed and potentially life threatening circumstances such as seizures, diabetes, asthma and/or anaphylactic reactions, please notify the principal immediately. An individualized "Emergency Response Procedure for Medical Conditions" plan will be developed in consultation with the Principal, Parent(s)/Guardian(s) and Physician(s) to address your child's individual needs.

Contact in case of Emergency: Please list in order of priority who to call if Parent/Guardian cannot be reached.

Name	Relationship	Phone Number	Cell Number
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Name	Relationship	Phone Number	Cell Number
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**Health Alert:** Allergies Yes  No  EpiPen Yes  No

If Yes, provide details: \_\_\_\_\_

**Medication:** Are routine medications needed? Yes  No

If Yes, provide details: \_\_\_\_\_

**Health Concerns:** Yes  No

If Yes, provide details: \_\_\_\_\_

**MEDICAL EMERGENCY:**

In the case of a medical emergency, when parent(s)/guardian(s) or designates cannot be contacted, student will be taken to hospital.

Other Instructions: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**INFORMATION COLLECTION AUTHORIZATION:**

This information is collected pursuant to the Board's education responsibilities as set out in the Education Act and its regulations. The information is collected for education purposes and is within the guidelines set out in the Municipal Freedom of Information and Protection of Privacy Act, 1989. This information will become part of the Ontario Student Record. Any questions with respect to this information should be directed to the Principal of the School to which you are applying/registered.

**Users:** Principals, Teachers, Support staff and Supervisory Officers