

COOPERATIVE EDUCATION STUDENT APPLICATION FORM ST. PAUL CATHOLIC HIGH SCHOOL

Date Returned: _____

Personal Information

Student Name:	Date of Birth:
Home Address (with Postal Code) _____ _____	Age (As of Sept.2015): Home Number: _____ Student Cell #: _____
Parent(s) or Guardian(s) Names: Father's Name: _____ Cell #: _____ Work #: _____	Mother's Name: _____ Cell #: _____ Work #: _____
Grade: (As of September 2015)	Homeroom Teacher:

Placement Interest Information

Suggest any specific placements (names of business) where you would like to work

	Specific Employer Details	Do you have a contact at this placement? Provide Contact Name & #
First Choice		
Second Choice		
Third Choice		

Are you interested in taking an Algonquin Dual Credit Course?: YES NO

Please Answer the following questions

Transportation	<input type="radio"/> Car <input type="radio"/> Bus <input type="radio"/> Parents <input type="radio"/> Walk			
What activities do you participate in that may restrict your time at a placement?	<input type="radio"/> None <input type="radio"/> Sports <input type="radio"/> Part-time Job <input type="radio"/> Other: _____			
Plans After High School	<input type="radio"/> Workforce <input type="radio"/> College <input type="radio"/> University <input type="radio"/> Undecided			
How would your teachers rate you in the following areas? (Check mark)		Low	Average	High
	Grades	_____	_____	_____
	Attendance	_____	_____	_____
	Being on Time	_____	_____	_____
	Commitment	_____	_____	_____
	Participation	_____	_____	_____
	Organization	_____	_____	_____
	Following Instructions	_____	_____	_____
Special Application Needed (Required in June 2015)	<input type="radio"/> DUAL CREDIT <input type="radio"/> CHEO <input type="radio"/> Big Brothers Big Sisters <input type="radio"/> Police Services <input type="radio"/> OYAP			

MEETING DATE: _____

Parents/Guardians and students should be aware that each candidate for Co-op:

- Is responsible for their own transportation
- Will be expected to adhere to placement health and safety regulations
- May require specific medical tests or vaccinations for some placements
- Must attend both the in-school classes and the co-op placement as scheduled to earn credits
- Must report absences to the co-op teacher, placement supervisor and school office
- Is expected to represent the school in a positive way that involves meeting all placement expectations
- Is covered by either the Workplace Safety and Insurance Board or Board of Education Insurance
- Additional Insurance coverage is available to all students at the beginning of each year
- Should not expect financial remuneration upon completion of the work placement agreement

Student Signature: _____

Date: _____

Parent/Guardian Signature: _____

Date: _____