



Please tailor as you

wish to meet the

needs of your school

and specific SHSM

programs.

SHSM Application Package

Please check the following boxes as each step is completed, and show this process sheet to your guidance contact as requested. Bring this sheet and the rest of this package with you to your meeting.

1. INFORMATION STAGE:

Gather information from the following sources:

- Read the SHSM brochure
- □ Read the SHSM facts sheet
- Talk to former alumni (if possible)
- E-mail or call the SHSM contact or guidance contact if you have further questions

2. AWARENESS STAGE:

Information you should know from the above research:

- □ What does "SHSM" stand for?
- □ What are the: 5 components of SHSM? expectations? credits earned and required? advantages?
- □ What does "Experiential Learning" mean?
- □ What are the four post-secondary pathways?
- U What kind of student would benefit from the SHSM program?
- □ What makes the SHSM a unique experience?
- □ What kinds of things will I be able to become involved in?
- U Where might I be for the Cooperative Education component?

3. INVESTIGATION STAGE:

You have taken part in one or more of the following:

- Program site visit
- Parent/Student Information Evening
- Program display at Parent/Teacher Interviews
- Talked with a teacher or student involved in the program
- □ Contact with a program representative:

(Program Representative's Signature)

4. APPLICATION STAGE:

You have completed all of the following assignments in preparation for the interview:

| Assignment 1 | Fact Sheet Assignment | |
|-------------------|---|--|
| Assignments 2 & 3 | Credit Counselling Summary and Attendance Profile | |
| Assignment 4 | Student SHSM Registration Form | |
| Assignment 5 | Teacher Recommendation Forms #1 & #2 | |
| Assignment 6 | Résumé – see your guidance counsellor | |
| Assignment 7 | Cover Letter | |
| Assignment 8 | Proposed Timetable | |

5. GUIDANCE INTERVIEW STAGE:

Information interview with SHSM program contact:

- □ Interview with SHSM teacher or Guidance
- □ Completed file: All of the above given to the SHSM program teacher/contact
- □ Acceptance

Assignment 1: SHSM Fact Sheet Assignment

Please read the SHSM Fact Sheet and then answer as many of the following questions as possible.

- □ What does SHSM stand for?
- □ What are the five required components of the SHSM?
- □ What are the advantages of the SHSM?
- □ What are the expectations?
- □ Which credits will I be earning in the SHSM?
- □ What is meant by experiential learning?
- U What are the four postsecondary education pathways/destinations?
- U What kind of student would benefit from the SHSM program?
- □ What is an internship?
- □ How does an internship work?
- □ What makes an SHSM a unique experience?
- □ What kinds of things will I be able to become involved in?
- □ Where will I serve my internship?
- U Where might I be for the Cooperative Education component?

Assignments 2 & 3: Credit Counselling Summary and Attendance Profile

Please include the following documents to complete your SHSM folder:

- □ Current Credit Counselling Summary (Please see your guidance counsellor.)
- □ Attached Current Transcript: Yes □ No □
- □ Current Attendance Profile (documentation attached)

Assignment 4: Student SHSM Registration Form

□ Complete the Student SHSM Registration Form (attached).

Assignment 5: Teacher Recommendation Forms

□ Include two Teacher Recommendation Forms to complete your SHSM folder (see attached).

Assignment 6: Résumé

□ Include your updated résumé. (See your guidance counsellor.)

Assignment 7: Cover Letter

□ Include a personalized cover letter in which you are applying for SHSM.

Assignment 8: Proposed Timetable

□ Include proposed timetables for Grades 11 & 12 (see attached).

| Durham Catholic District School Board SHSM Registration Form SHSMSSISSION NON-PROFIT SPECIALIST HIGH SCHOOL MAJOR (ST. MARY CSS) | | | | | | |
|--|---------------------|-----------------|-------------|-----------------|--|--|
| DATE | | | | | | |
| Personal Information: F | Please print neatly | and provide the | information | below: | | |
| Student's Legal Name: | Surname | First Name |) | Middle Name | | |
| Student O.E.N.: | | Но | Homeroom: | | | |
| Gender: Male 🗅 Female 🗅 | | Pres | sent Age: | Present Grade: | | |
| Home Address: | lumber/Street Name | Apt/Unit # | City/Townsl | hip Postal Code | | |
| Home Phone: | Cell: | | _ E-mail: _ | | | |
| Home School: | | School Ph | one: | | | |
| Parent/Guardian Name (printed | d): | | | | | |
| Parent/Guardian Signature: _ | | | | | | |
| Parent/Guardian Contact Phon | e #: | | | | | |
| Parent/Guardian E-Mail: | | | | | | |
| Date Completed: | | | | | | |
| Other comments: | | | | | | |
| Please retain for interview. | | | | | | |





Proposed Timetable for SHSM

| Student Name: | | School: | | | |
|-----------------------|-------------|-----------------------|-------------|--|--|
| Current Grade: | | Date: | | | |
| Grade 11 Semester One | | Grade 11 Semester Two | | | |
| Course Code | Course Name | Course Code | Course Name | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Grade 12 Semester One | | Grade 12 Semester Two | | | |
| Course Code | Course Name | Course Code | Course Name | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Other:







Teacher Recommendation Form #1

| Student Name: | | Grac | le: | | | | |
|---|---------------------------|---------------------------|-----|---|---|---|--|
| The student indicated above has applied for theSHSM Program. The Teacher Recommendation Form below is an important part of the assessment of the student candidate. Thank you for sharing your input and supporting this student. | | | | | | | |
| Catanani | | $\overline{\mathfrak{S}}$ | | • | | | |
| Category | | 1 | 2 | 3 | 4 | 5 | |
| Punctuality | | | | | | | |
| Attendance | | | | | | | |
| Academic achievement | | | | | | | |
| Ability to work independently | | | | | | | |
| Reading level | | | | | | | |
| Maturity | | | | | | | |
| General conduct | | | | | | | |
| Respect for authority figures | | | | | | | |
| Reliability and responsibility | | | | | | | |
| Demonstration of interest in sector curriculum. | | | | | | | |
| Teacher's comments (student's strengths | and areas for improvement | :): | | | [| | |
| Teacher's Name: | Course: | Date: | | | | | |

Please return this form to the Guidance Department as soon as possible. Thank you!

* Note: Information may be shared with the student and parent/guardian.





Teacher Recommendation Form #2

| Student Name: | | Grad | le: | | | | |
|---|---------------------------|-------|-----|---|---------|---|--|
| The student indicated above has applied for the | | | | | | | |
| Catamana | | © © | | | \odot | | |
| Category | | 1 | 2 | 3 | 4 | 5 | |
| Punctuality | | | | | | | |
| Attendance | | | | | | | |
| Academic achievement | | | | | | | |
| Ability to work independently | | | | | | | |
| Reading level | | | | | | | |
| Maturity | | | | | | | |
| General conduct | | | | | | | |
| Respect for authority figures | | | | | | | |
| Reliability and responsibility | | | | | | | |
| Demonstration of interest in | | | | | | | |
| Teacher's comments (student's strengths | and areas for improvement | t): | | | | | |
| Teacher's Name: | Course: | Date: | | | | | |

DATE



Dear Parent/Guardian:

The St. Mary Technology Department is proud to be piloting an exciting new project in partnership with the Ministry of Education. This project is aimed at streamlining the pathway to work, whether that path involves apprenticeship, college, university or direct entry into the workplace.

Our pilot project is a **Specialist High Skills Major (SHSM) in the Transportation sector,** and it works in conjunction with the requirements of the Ontario Secondary School Diploma. Students who complete the bundle of credit requirements will receive a red seal of recognition on their high school diploma, indicating a level of technical proficiency and skill in the Transportation SHSM. This diploma designation is recognized in post-secondary institutions and workplace avenues.

If your son/daughter pursues this exciting challenge, he/she will work to complete the following requirements:

- Four major Transportation Technology credits
- Grade 11 or 12 credits in Math, Science and English, where some units are completed using lessons taught in context with the transportation sector
- Seven industry certifications or training courses that are representative of requirements that are coveted by employers and post secondary institutions (e.g., First Aid, C.P.R.)
- Experiential learning activities based on authentic work experience outside the traditional classroom setting
- Participate in experiences that will allow the student to reach ahead in his/her post secondary destination of choice
- o Completion of the Ontario Skills Passport to develop strong work habits and essential skills
- Two cooperative education credits to complement traditional classroom settings

This pilot program represents an excellent opportunity for your child to be exposed to authentic learning activities and environments that are not readily available in a traditional classroom setting. In addition, students are free to opt out of this program with no penalty if they feel that it does not enhance their educational destination pathway.

If you would like more information, contact any of the administrative staff at St. Mary (905-420-7166) or Mr. V. Sorbilli (ext. 4068). Please make an appointment to discuss any questions and to view our transportation facilities.

Sincerely,

Vince Sorbilli, Technological Education Teacher





Consent Form

There are exciting and new ways for students to take learning beyond the traditional classroom. The Student Success Strategy gives students more ways to accumulate credits to graduate, while improving the quality of a high school education. At the heart of the Student Success initiative are many innovative and new programs that allow students to customize their high school experience around learning that's relevant to them. The Ministry of Education needs to tell parents, students, teachers, employers and other partners about these programs so that they can encourage kids who don't know about these programs to find their own best high school experience. The ministry would like to use your success story and photograph to help communicate this information using some of the tools listed below. This form is asking for your permission to do just that.

I, ____

allow the Ministry of Education to use:

- my name
- · a quotation or summary of my opinion and experience that I expressed orally or in writing during the phone interview

for the uses described below, and for no other purpose:

- advertising on television, radio, internet, or newspaper (print ad and/or information insert) with the purpose of: increasing public
 awareness and knowledge about programs in Ontario high schools, communicating the importance of getting a high school
 diploma, raising the profile of skilled trades careers in Ontario, engaging businesses and other partners in the delivery of high school
 programs and encouraging people to enquire about available programs.
- information (e.g. brochure, fact-sheet, poster or other display material) that may be sent/distributed to Ontario residents (parents, students, schools, principals, teachers, colleges, universities, and businesses etc.).
- communications materials (e.g. speeches, news releases, backgrounders) that may be released to the media (television, radio, newspaper, etc.)
- Web, Internet, Intranet based communications materials such as PDF or html versions of printed brochures, posters, interviews or articles posted on Ministry of Education websites.
- participation in an event where representatives of the media (television, radio, newspaper, etc.) may or may not be present. I acknowledge that my image, name, voice, etc. may be used by the media

Personal information collected pursuant to this form is collected in compliance with section 38(2) of the *Freedom of Information and Protection of Privacy Act.* The information will be used for purposes described on this form and for no other purpose. If you have any questions about the collection, use or disclosure of this personal information, contact: Josie Vogel, Team Lead, Public Education Unit, Communications Branch, Ministry of Education, Tel: (416)325-0721, Fax: (416) 325-9134.

I acknowledge that the personal information referred to above was provided freely and voluntarily.

By signing this form, I agree to release the government of Ontario and its representatives from any claim or liability that may arise out of the use or disclosure of the information collected on this form.

I have read this form after it was completed and I understand its contents. I hereby give my consent as follows:

Signatures are to be affixed in the appropriate space provided below:

To be signed by the individual named above:

Signature Print Name Date

To be signed by a parent or legally appointed guardian of individuals aged eighteen (18) years or under:

Signature

Print Name

Date

To be signed by a legally appointed guardian of individuals who cannot provide their informed consent: