

Archbishop Anthony Meagher Catholic Continuing Education Centre

SUMMER COOPERATIVE EDUCATION APPLICATION (2022) Students from Out of Board must also register online for Summer School Coop

Please Note:

- 1. The summer school application form must accompany this cooperative education application
- 2. Summer pre-placement classes will be in-person: July 4 and 5 from 8:30 am to 2:30 pm
- 3. Pre-placement classes will be held at Father Leo J. Austin CSS
- 4. Work placement can be in-person or virtual, pending availability, and begin on July 6, 2022. The hours of work at the placement will vary depending on the number of credits a student is earning.
- 5. If you have not been notified by June 27, please contact Continuing Education, Oshawa Campus immediately
- 6. Include a resume, status sheet or transcript and an attendance record with this coop application

Please indicate the Cooperative Education Program	that you are applying for. Applicat	ion due dates are indicated below.
Summer School (1 credit)	Summer School	(2 credits)
Student Name (please print clearly):	Current Grade:	Date of Birth:
		Age:
Name of Secondary School:	Email Address *to be used for co-op communication only	Home Phone:
		Cell Phone:
Home Address (street, city, postal code):		
Are you currently enrolled in a Specialist High Skills Major	r (SHSM)? Yes 🛛	No 🗖
If you are enrolled in a SHSM program, please indicate th Certifications that you have completed.	e program/sector (e.g. Business, Trar	sportation, Arts & Culture) and list the
SHSM Program:		
PLEASE PROVIDE A COPY OF: Last Seconda	ry School Transcript or Status She	et
Proof of Canadian Citizenship or Residency S	Status (Birth Certificate, Passport, Cana	adian Citizenship Card)
2 nd piece of Identification (Driver's License, piec	e of mail addressed to you)	
Resume		
Attendance Record		

Guidance Counsellor (printed)	Guidance Counsellor Signature	Date
School Administrator (printed)	School Administrator Signature	Date
Archbishop Anthony 850	send completed applications to: Meagher Catholic Continuing Education King St. W, Unit 26, Oshawa 8-0571 or Email: <u>credit.reg@dcdsb.ca</u> By June 27, 2022	Centre

PARENT/GUARDIAN CONSENT & STUDENT AGREEMENT

The Cooperative Education Program strives to ensure a successful learning experience for every student.

In order to remain in the Cooperative Education program, the student will comply with the following requirements:

- The student will earn one or two credits upon successful completion of all in-school and placement components; however, the placement experience may be terminated by the school or the placement with a loss of credits if expectations are not met.
- The student will report to their school and their work placement as scheduled and indicated on the Work Education Agreement.
- The student is to notify the placement supervisor and Cooperative Education teacher prior to the beginning of the shift if he/she is unable to report for work due to illness or emergency; and the parent/guardian must notify the school attendance office.
- > The student will respect and adhere to the school and employer regulations and expectations.
- The student will work in a courteous, responsible and business-like manner.
- The student will meet the employer's expectations of dress and behavior.
- The student will adhere to company health and safety regulations.
- > The student will complete weekly activity log sheets as well as other required assignments by the assigned due dates.

INSURANCE COVERAGE

- Students will receive Workplace Safety and Insurance Board Coverage from the Ministry of Education in unpaid coop placements.
- Students must complete and submit a Work Education Agreement form with all required signatures prior to beginning the placement.
- All students are encouraged to obtain additional Student Accident Insurance Coverage. Forms can be obtained from the main office at each secondary school.

Transportation to and from the co-op placement is the student's responsibility

We, the undersigned, agree to participation in the Cooperative Education Program of the Durham Catholic District School Board under the conditions set forth in this agreement:

Student Name (printed)	Student Signature	Date
Parent/Guardian Name (printed)	Parent/Guardian Signature	Date
	used for purposes consistent with the Education Act Information and Protection of Privacy Act.	and the Municipa

Must be received on or before **Monday, June 27, 2022** at Archbishop Anthony Meagher CCEC 850 King Street W., Unit 26 Oshawa, ON L1J 8N5 Tel: (905) 438-0570 Fax: (905) 438-0571 Email: credit.reg@dcdsb.ca