

Fredericton High School



2018-2019

SKILLED TRADES CO-OP 120 APPLICATION

NAME: _____

HOMEROOM TEACHER'S NAME: _____ ROOM #: _____

STUDENT NUMBER: _____ GRADUATING IN JUNE 2019? _____

STUDENT E-MAIL: _____

DATE OF BIRTH: _____ AGE: _____
Year Month Day

NAME OF PARENT OR GUARDIAN: _____

HOME PHONE: _____ PARENT WORK: _____

PARENT E-MAIL: _____

DESIRED CO-OP CAREERS

PRIORITY	FIELD	SUGGESTED PLACEMENT
1		
2		
3		

Skilled Trades Co-op 120 is a three-credit course. Scheduling will vary depending upon the placement site and the school timetable. Students must be able to adapt and work in independent environments.

Skilled Trades Co-op 120 has limited enrolment. An interview with the Instructor will be scheduled in June or early September. As well, a copy of your transcript will be obtained and teachers may be contacted as part of the application process. All of these factors will determine if the student is accepted into the program.

A Co-op worksite placement in any type of occupation depends entirely upon market availability. Every attempt will be made to place students into occupational areas of their first choice. If an area of work becomes unavailable at the time of actual placements it may become necessary to use the alternative choices. Parental suggestions and contacts are welcome; although we refrain from placing students to work at their parent's place of employment.

DUE DATE: THURSDAY, APRIL 5TH

LIST CAREER-RELATED COURSES YOU HAVE TAKEN:

WHAT ARE YOUR CAREER/EDUCATIONAL PLANS AFTER HIGH SCHOOL?

ARE YOU NOW EMPLOYED? _____ IF YES, PLEASE COMPLETE THE FOLLOWING:

Employing firm _____

Address _____

Supervisor _____

Phone _____

How long have you been employed? _____

How many hours per week do you work? _____

Describe the work that you do _____

HOW MANY DAYS DID YOU MISS LAST SEMESTER? _____

WHO IS YOUR FHS GUIDANCE COUNSELLOR? _____

DO YOU PREFER TO WORK WITH OTHERS OR ALONE? _____

DO YOU HAVE A VALID NEW BRUNSWICK DRIVER'S LICENCE? _____

WHAT METHOD OF TRANSPORTATION DO YOU PLAN TO USE TO TRAVEL TO AND FROM YOUR CO-OP PLACEMENT? (No transportation is provided by the School)

BRIEFLY STATE WHY YOU WISH TO BE A MEMBER OF THE CO-OP PROGRAM.

PLEASE LIST ANY HOBBIES, INTERESTS, SPECIAL SKILLS, TALENTS OR AWARDS.

STUDENT'S DECLARATION

If this application is accepted and if I am placed with a Co-operative Education employer, I pledge to be conscientious, hardworking, and will attend school and my place of employment regularly. I will do my best to represent myself and the school at all times.

Student's signature

PARENTAL CONSENT

All students are covered by New Brunswick Workers' Compensation with all costs thereof being covered by the Province of New Brunswick Department of Education. Anglophone School District West recommends that all students accepted for Co-operative Education purchase Student Accident Insurance for twelve months' protection. I am aware that my child has applied for acceptance to Skilled Trades Co-op 120.

Parent's signature

HOMEROOM ADVISORY INFORMATION

This student has applied for Skilled Trades Co-op 120. This course has limited enrolment and it is necessary to select the best candidates who apply as they are representatives of our school in the community. Please complete the following information. Please see me if you have any further comments to help in the evaluation of this student.

Number of Days missed September-now _____

Number of In-school/Out-of-school Suspensions _____ Reasons? _____

Is the student on time for Advisory Period? Always Frequently Seldom Never

Does the student bring excuses for time missed? Always Frequently Seldom Never

Recommendation for a work placement? Yes Yes with Reservations Unsure No

Homeroom Advisor's signature

**THIS APPLICATION MUST BE RETURNED TO
MRS. RAMIREZ'S MAILBOX AT THE MAIN OFFICE
ON OR BEFORE THURSDAY, APRIL 5TH**