

LCVI COOPERATIVE EDUCATION APPLICATION FORM

Date Received

Students **MUST** return the completed co-op application to the Student Services office.

BE SURE TO RECORD CO-OP ON YOUR OPTION SHEET.

Student's Last Name:	Student's First Name: Age:	
Student's Phone:		
Current Grade:	Co-op Taken before: ☐ Yes ☐ No	
Request for: 2 Credit Co-op (half days for one semester) GWL 30D / GLN40D 4 Credit Co-op (all day for one semester) GWL 30Q / GLN40Q	□ SHSM Pick One: □ Business □ Construction □ Health & Wellness □ Transportation □ OYAP - Fast □ Ontario Youth Apprenticeship Program (applied to the OYAP Accelerated program for Grade 12)	
in the cooperative education program is associated co-op program or with a previously completed coufor example: • A student placed in an office setting with a carpenter will	ill have business or computer course(s) have a construction technology course(s) rs in order to check if the student is suitable for the ng for a particular area of work than there are	
co-op program must be reliable and responsible. What type of co-op placement are you interfered first choice:	INSTITUTE	

Parental Consent: ☐ Please	check off the following boxes	
☐ My son/daughter may participate in an exp	periential learning opportunity within the communit	ty.
☐ I understand that a student is <u>not paid</u> mor Diploma (OSSD).	ney at the workplace; credits are earned towards the	eir Ontario Secondary School
$\hfill \square$ I understand that travel between LCVI and	the placement is the responsibility of the student.	
$\hfill \square$ I understand that some workplaces may replacement	equire specific medical tests or screening before the b	beginning of the
$\ \square$ I understand that a student must adhere to	the workplace's health and safety regulations.	
$\ \square$ I understand that completion of this applic process.	ration does not ensure a Co-op placement; students v	will go through an interview
$\ \square$ I understand that Co-op work placements r with the Co-op Education program.	must be "tied to" a related in-school course taken pre	eviously or concurrently
$\hfill \square$ I understand that a student must complete	110 hours per co-op credit and as such must attend	placement every day.
	Parent/Guardian Name (Please print)	
Signature of Student		
	Parent/Guardian Signature	Date
Obtain 2 References: (Teacher References: Please write a few comments of willingness to learn.	and/or Employer) on the student's work ethic, record of attendance a	nd punctuality, maturity and
Name of Reference 1:	Name of Reference 2:	
Comments:	Comments:	
comments.	comments.	
Signature of Reference 1:	Signature of Reference 2:	
LCVI is always looking for new workplace lo student, please provide this information an	ocations. If you are aware of a business interestend a co-op teacher will contact them.	ed in having a co-op
Name of Business	Contact Person	
Address		
Telephone	Email Address	_
F		