

CONSTRUCTION TASK PROGRAM 2024 – Semesters 2

Application Form

Program Requirements

To be admitted into the Construction TASK Program, applicants should:

- be in grade 11 at the start of the program (grade 10 & 12 applicants may be considered if seats go unfilled)
- have their parent/guardian's written permission by signing below
- demonstrate an interest and level of maturity suitable for skilled trade working environments
- be able to make provisions for their own transportation to and from Royal Bay Secondary School, and to a work experience job site when placed
- be interested in pursuing a career in skilled trades
- be prepared to find and secure a 3 week work experience placement in a trade of interest (June placement during school time)

Required Application Documents - *Submit your completed application by Friday, November 24, 2023.*

- 1) Attendance Record
 - ***Students must be attending school regularly; TASK is a participatory-based program***
- 2) TASK Code of Conduct Form
 - Student behaviour and actions must align with this document
- 3) A copy of your most recent secondary school transcript (unofficial copies, please)
 - ***Ideally > 60% in a Math 10 and an English 10***
- 4) SIP Program Application Package
 - ***Please be sure to complete all sections of this package***
- 5) ITA Youth Explore Program Stream Registration Form
- 6) Emergency Information Form

Interview

Applicants will be asked to attend a ten-minute interview with the program teacher, SD62 Career Education Lead, Camosun representative, and a member of the RBSS leadership team. Once selected for interview, students will be contacted individually for interview times and availability. The date for these has been set for **December, 1st 2023**; students will be notified within one week of this date whether they have been successful or not. If successful, there will be an Education Planner application fee of \$45.27 (instructions to follow via email).

Signatures: *I hereby state that I grant permission for my child/dependent to participate in the Construction Trades Awareness Skills & Knowledge (TASK) Program hosted at Royal Bay Secondary School.*

Parent/Guardian Name (printed)

Student Signature

Parent/Guardian Signature

Date

Date

Trades Awareness, Skills, and Knowledge (TASK) Code of Conduct

Overview:

SD62 TASK programs offer dual-credits for high school and college courses, as well as work experience and potentially Youth Work in Trades. Excellent attendance and participation are necessary for the successful completion of this program. As this is a participation-based program, absenteeism results in the student not meeting the program's learning outcomes and expectations.

Purpose:

This document is reviewed at an information session held for both parents and students at the beginning of the term, ensuring that everyone understands the behaviour expectations.

In addition to the SD62 Secondary School Code of Conduct, the following are specific requirements of TASK programs:

- Participation and Engagement
 - Students are expected to participate and engage in all aspects of the program.
- Respect
 - You represent SD62 as well as the program host school; you are expected to conduct yourself in a respectful manner whether at Royal Bay, Edward Milne, Belmont, Westshore, Camosun, worksites, or out in the community.
- Attendance
 - Excellent attendance ensures that students successfully progress through all aspects of the program.
 - Arrive at class/work site on time.
 - Manage break time appropriately.
- Safety
 - Arrive to the classroom and work sites wearing the appropriate safety equipment
 - **CSA approved steel toed work boots**
 - Conduct yourself in a safe manner; practicing the TASK Safety Policies and Procedures
- Cell Phones
 - Put away during instructional time and work experience, as per instructor/employer guidelines.

TASK is a program of choice. Students are expected to adhere to these behaviour expectations. Students who violate this code of conduct will meet with school/district administration, followed by a two-week probationary period. If behaviour does not improve during that time, the student will be removed from the program.

Parent/Guardian Signature

Print Name

Date

Student Signature

Print Name

Date

SECTION 1: STUDENT & PARENT/GUARDIAN INFORMATION

<input type="text"/>	<input type="text"/>	<input type="text"/>
Legal Last Name	Legal First Name	Preferred First Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Student Email	Student Cell Phone	Student Birthdate (mm/dd/yyyy)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Parent(s)/Guardian(s) Name(s)	Parent(s)/Guardian(s) Primary Email	Parent(s)/Guardian(s) Phone

SECTION 2: SIP PROGRAM SELECTION

- TASK (Trades & Skills Knowledge) <input type="button" value="v"/>	<input type="text"/>	~ Select Grade ~
Program Selection	Program Start (mm/yyyy)	Current Grade
SD62 - Sooke <input type="button" value="v"/>	62 - Royal Bay <input type="button" value="v"/>	<input type="text"/>
Student's School District	High School Name	Expected Grad Date

SECTION 3: DECLARATION & CONSENT FOR COLLECTION, USE, & DISCLOSURE OF PERSONAL INFORMATION

Personal information is collected under the legal authority of the College and Institute Act, RSBC, 1996, c. 52 and s. 26 of the Freedom of Information and Protection of Privacy Act, RSBC, 1996, c. 165 for administrative and statistical research purposes of the College, and/or the ministries or agencies of the Province of British Columbia and the Government of Canada. The information that you provide is protected, used and disclosed in compliance with these purposes. If you have any questions about the protection of your personal information, please review Camosun College's commitment to privacy, or email privacy@camosun.bc.ca

I authorize Camosun College to communicate and disclose my personal information regarding registration, attendance, progress, and related enrolment information to: my Secondary School and/or School District; Ministry of Advanced Education and Skills Training; and other agencies as appropriate

☐ Yes

☐ No

SECTION 4: STUDENT SUPPORT SERVICES

Please identify your citizenship: ~ Select One ~

Are you of Indigenous ancestry? Yes ☐ No ☐

Do you have an Individual Educational Plan (IEP), learning challenge or other disability which may require additional support services Yes ☐ No ☐

If yes, please make an appointment with the CAL (Center for Accessible Learning) , prior to course start date, by calling 250-370-4049, or by email at accessible@camosun.bc.ca.

SECTION 5: FOR SOUTH ISLAND PARTNERSHIP OFFICE USE

<input type="text"/>	<input type="text"/>	<input type="text"/>
Camosun C#:	Section #:	ITA #:

***We will do our best to accommodate your selection(s), however, seats are not guaranteed**

SECTION 6A: HIGH SCHOOL / SCHOOL DISTRICT / SIP & CAMOSUN RESPONSIBILITIES:

We will:

- provide tuition funding for program training at Camosun College
- Assist you to meet all prereqs for your program; & create an Transition Plan that maps your final years of high school
- Help you to complete a SIP application package and submit it on your behalf
- Register you as a Youth Train in Trades student (for trades programs only)
- Provide you with student support services as needed (assessment, learning skills, English and/or math upgrading, counselling, disability resources)
- Encourage you to be proactive in informing the Centre for Accessible Learning (CAL) of specific learning needs and IEPs
- Liaise with your parents, teachers, and instructors regarding your college progress and participation; and provide post-secondary marks to your high school for graduation credits
- Inform you of the training requirements specific to your career area

SECTION 6B: STUDENT RESPONSIBILITIES:

As a South Island Partnership student, I agree to:

- Ensure I have met all prerequisites, completed any necessary assessments, and undergone a relevant work experience placement in my chosen program area
- Submit a completed SIP application package; and attend a SIP Orientation, upon invitation
- Create an Education Planner profile and pay an application fee (valid for 12 months) to be accepted into Camosun College
- Make an appointment with the Centre for Accessible Learning (CAL) if I have an IEP or learning challenge
- Purchase the required text books, support materials, equipment, and clothing, as needed
- Be prepared for the rigors of a first year post-secondary program which includes a commitment to completing homework and study expectations (2-4 hours daily), striving to achieve a passing mark of at least 70%, and attending after-session tutorials offered by instructors, as needed
- Contact my instructor if I will be absent or late; I understand that punctuality and attendance are mandatory requirements of Camosun College
- Promptly inform my high school careers team & the SIP Office if I wish to drop or withdraw from my course(s). As per the college policy, students who drop a course prior to the start date will receive a 100% refund. Dropping your course within the first week of class, will result in your district being charged 20% of the course tuition. If your communication is not prompt, this charge could be passed on to you, the student. Any course drops beyond the first week of classes will result in your school district being charged the full tuition amount. Students can withdraw from their program without academic penalty up to the last day of instruction.
- Be financially responsible for both tuition and student ancillary fee payments, if I require an extension for my program
- Follow both my home school Code of Conduct and the [Camosun College Student Conduct Policy](#)
- the declaration & consent for collection, use, and disclosure of my personal information as outlined in Section 3

I certify the information provided in this application is true, accurate, current, & complete to the best of my knowledge and understand Camosun College may verify accuracy. I agree, if admitted and enrolled at Camosun College, to comply with all policies and procedures.

☐ Yes ☐ No

Student Name

Student Signature

Date

Parent / Guardian Name(s)

Parent Signature

Date

SECTION 7: FOR SCHOOL BASED CAREERS TEAM TO COMPLETE

The following items must be added to application:

☐ Student Transcript Service (STS) completed (back pg)

Proof of Work Experience included:

☐ Yes

☐ No

☐ Attendance Report

☐ Ed Planner (EPBC) Completed & Paid

School-Based Career Coordinator Name

Date

☐ By clicking this box, you support this student to take part in this / these courses through SIP

Students applying to take a program must complete this form.

1. Describe why this is the career area for you.

2. Describe how your work experience or school activities have prepared you for this program.

3. Describe what you will do to be successful in this program.

Youth Explore Program Stream Registration Form

Please complete and return this form to your district career coordinator. All mandatory fields must be completed.

*Mandatory Fields

A. Student Information

*Legal First Name:	Legal Middle Name (s):	*Legal Last Name:
*Date of Birth (MM/DD/YYYY):	*Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Personal Education Number (PEN):
*Suite Number:	*Mailing Address:	
*City:	*Province:	*Postal Code:
*Phone Number: ()	Secondary Phone Number: ()	*Email Address:
*Do you identify yourself as an aboriginal person? <input type="checkbox"/> Yes <input type="checkbox"/> No First Nations <input type="checkbox"/> Métis <input type="checkbox"/> Inuit <input type="checkbox"/>		

B. Parent/Guardian's Information

I, _____
(print surname followed by given names of parent/guardian)

of _____
(street address) (city, town) (postal code)

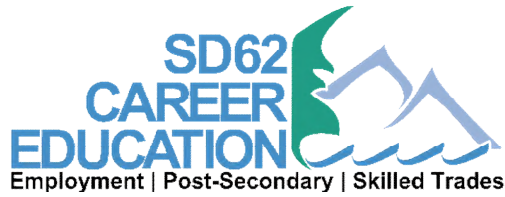
Declare that:

- I am the ☐ custodial parent ☐ legal guardian of the minor named above; and,
- I authorize the school to release the information outlined in Sections A & B to Industry Training Authority for the purpose of registering the student with the ITA in a Youth Trade program; and to use the registration information for statistical data.
- I understand that I can only withdraw this consent by written request addressed to the school.

Parent/Guardian's Signature:	Date (MM/DD/YYYY)
SD/Independent Board Authority Contact's Signature	Date (MM/DD/YYYY)

C. Program Information (To be completed by School District/Independent Board Authority)

Program Type (Select one): Youth Explore Trades Skills (in SD) <input type="checkbox"/> Youth Explore Trades Sampler (partnered with PSI) <input type="checkbox"/>	Program Start Date (MM/DD/YYYY):	Program End Date (MM/DD/YYYY):
Partnering Training Provider for Youth Explore Trades Sampler:		



TASK
Emergency Information

Personal Information

Last Name - _____ First Name - _____

Date of Birth - ____ / ____ / ____
MM/DD/YYYY

Emergency Contacts

Parent/Guardian Full Name - _____

Phone - _____ Email - _____

Alternate Emergency Contact Full Name - _____

Phone - _____ Email - _____

Medical Information

Personal Health Care Number - _____

Family Doctor - _____ Contact Info - _____

Please note any medical/physical/psychological details that the school/employer should be aware of or that might affect performance (i.e. allergies, epilepsy, diabetes, ADHD): _____

Please note any medication that the school/employer should be aware of before employment (i.e. EpiPen):
