



Industry Training Program Application

Please complete all fields.

Student Name: _____ P.E.N.: _____

Address: _____

City: _____ Postal Code: _____

Email address: _____ Date of Birth: _____

Current School: _____ Current Grade: _____

Counsellor: _____ Student Cell # : _____

Program you are requesting:

Youth Train in Trades:	Industry Certification:
Auto Body and Collision Technician	Cisco Networking Academy
Automotive Service Technician	Fitness Instructor
Baker	Tourism & Event Management
Carpenter	Microsoft Office Specialist
Construction Electrician	Palo Alto Cybersecurity Academy
Professional Cook	Industry Connect:
Hairstylist	DigiPen Gaming Academy
Metal Fabricator	Film & Broadcast
Painter	Graphic/Media Arts
Plumber	Health Sciences
Welder	Music Production & Technology
Other: _____	Robotics (Mechantronics)

Parent/Guardian Name: _____

Email address: _____

Please complete the address and phone number fields below **only** if they are different from the student.

Address: _____

City: _____ Postal Code: _____

Phone # _____ Cell # _____

I hereby give my daughter/son permission to participate in the Burnaby Schools Industry Training Program.

Please note: For certain Industry training programs, students may be required to purchase personal equipment and supplies.

Parent/Guardian Signature: _____ Date: _____

Student Signature: _____ Date: _____

Administrator Signature: _____ Date: _____

Attach information as outlined on Industry Training Program Application Checklist

Industry Training Program Application Checklist

Step #1 Submit application package to include:

- Industry Training Program Application Form
- Student Self Evaluation & Transition Plan Form
- Teacher Reference Form
- Employer Reference Form (optional)
- Current resume

Please note:

Upon acceptance into the program, Out-of-district students must submit the following:

- Personal Information Consent – Secondary Form
- Notice of Outside Media in Schools – Secondary Form

Upon acceptance into the program, ALL students must submit the following:

- Student Medical Form
- Community Field Experiences Consent Form
- District Media Release Form
- Youth Apprenticeship and Sponsor Registration Form
(For Youth Train in Trades Program ONLY)

Step #2 Submit application to: Your school's Career Centre

Step #3 Attend Interview

Step #4 Your school will be informed of your acceptance and a formal Letter of Acceptance will be sent to your home

FOR SCHOOL USE ONLY: WCB Work Safety Test Passed Pending

Schools attach the following documents to students applications:

- Permanent Student Record
- Attendance History
- Copy of student's most recent report card
- Student designation (if applicable) _____
- Copy of student's IEP (attached)

Signature of Administrator: _____

Are you currently working in this industry field?

Yes

No

If so, what is the name of your employer _____

What aptitude/skills do you possess that will make you successful in your chosen program?

What are the most important qualities employers look for in an employee?

What are your long term Education / Career goals (1-5 years)?

Is there a specific occupation for which you are intending to pursue training or employment?

Do you have any allergies or health concerns that may affect your participation in your chosen program? (eg food allergies, injuries etc.)

Signature: _____ **Date:** _____



List the courses you are taking and/or are planning to take in Grade 11 and 12

Grade 11	Grade 12

Which courses are most directly related to your career plans?

Teacher Reference Form

Student Name: _____

Current Grade: _____

Program Applied To: _____

Please assist in the selection process by providing information about the student.

How long and in what capacity do you know the applicant?

Do you think that this student demonstrates a positive and enthusiastic attitude towards learning?

Does this student have strong communication skills?

Do you feel that this student is an attentive listener and is able to follow directions?

What qualities will make this student successful in their chosen program?

Teacher Name: _____

Signature: _____

Date: _____



Employer Reference Form

Student Name: _____

Current Grade: _____

Program Applied To: _____

Please assist in the selection process by providing information about the student.

How long has this student been employed at your business?

What type of tasks/responsibilities does the student perform?

Do you think that this student demonstrates a positive and enthusiastic attitude towards learning?

Does this student have strong communication skills?

Do you feel that this student is an attentive listener and is able to follow directions?

What qualities will make this student successful in their chosen program?

Employer Name: _____

Signature: _____

Date: _____