Return to Career Centre by:	
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Industry Training Program

Application for Participation

All fields must be completed for your application to be considered.

PEN: Birthdate: Grade: Student Cell:		
Birthdate: Student Cell:		
School:		
Counsellor:		
ndustry Certification		
☐ Cisco Networking Academy		
 Early Childhood Education Assistant 		
☐ Kinesiology & Fitness Instructor		
 Palo Alto Cybersecurity Academy 		
☐ Tourism & Event Management		
ndustry Connect		
☐ Film & Broadcast		
☐ Graphics & Media Arts		
☐ Health Sciences		
☐ Music Production & Technology		
□ Robotics		
☐ Theatre Production & Design		
Program Not Listed		
☐ Other:		
Postal Code:		
Phone:		
Email:		



TO BE COMPLETED BY SCHOOL STAFF				
WorksafeBC TestPassedPending				
Schools to attach the following documents to student applications:				
 □ Copy of Permanent Student Record □ Student Attendance Summary □ Copy of student's most recent report card □ Copy of current IEP, AIP and/or ELL plan □ Student Designation:				
Signature of Administrator: Date:				
Application Checklist				
 Complete each section of this application booklet. Student Medical Form Community Field Experiences Permission Form Student Self Evaluation Transition Plan Career/Program Research Form Two References: one teacher and one community-based/employer Attach your current resume Attach additional information required for the program you are applying to (see below) Submit your completed application to the Career Centre at your school. Participate in an interview (all applicants are interviewed). For all Youth Train in Trades Programs: Youth Apprenticeship and Sponsor Registration Form (completed upon acceptance into program) Student must hold a valid piece of Government photo ID (required by SkilledTradesBC to write 				
exam) For Early Childhood Education Assistant Program: One page autobiography (include details about your values, interests, and the reasons for choosing to care for and educate young children) Three reference forms must be completed instead of two Student must provide a copy of Government ID (BCID, Driver's License, passport, etc.) Upon acceptance, students will undergo a Criminal Record Check for Children and Vulnerable Adults and be required to provide vaccine records.				



Industry Training Programs Student Medical Form

Date of Birth (YYYY/MM/DD):		_/	/	
This declaration is being reques	sted in conr	nection to	an applica	ation for participation in a
Industry Training Program with				
Continuing Education and/or a		•		1, 2amas, command, a
Continuing Education and/or a	iocai i ost	secondary	mstitute.	
The duties in this line of study r	may include	e direct w	ork with gr	oups of young children ar
in a community setting. Good p	hysical and	d emotion	al stability	is required. For purposes
studies and practicums/Work E	xperience I	Placemen	ts, some e	mployers may also require
written medical examination pl	•			
also be required for placement	•	•		
·		•		J
Emergency Contact:				
Phone:				
Relationship to student particip	oant:			
Secondary Emergency Contact:				
Phone:				
Relationship to student particip	ant:			
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Please inform us of any extra su	upport, spe	cific acces ts only:	sibility or	
Please inform us of any extra sully Childhood Education Assistant I declare that I am physically a with groups of young children	nt applicant	cific acces ts only: nally able	to perforr	
Please inform us of any extra sully Childhood Education Assistant I declare that I am physically a with groups of young children Student Signature:	nt applicant nd emotion and adults	cific acces ts only: nally able	to perforr	
Please inform us of any extra sully Childhood Education Assistant I declare that I am physically a with groups of young children	nt applicant nd emotion and adults	cific acces ts only: nally able	to perforr	
Please inform us of any extra sully Childhood Education Assistant I declare that I am physically a with groups of young children Student Signature:	nt applicant nd emotion and adults	ts only:	to perforr	n the duties required of w

declaration will be kept confidential and used only in emergency situations.

3



Industry Training Programs Community Field Experiences Permission Form

	Dear Parent/Guardian:
	Over the course of the year, students participating in Burnaby's Industry Training Programs may be leaving school grounds for a variety of <i>community field experiences</i> related to program curriculum. Students may be required to move between school sites independently in order to participate in their chosen program.
	In some cases, students will walk under supervision and/or independently to local facilities, such as construction sites or to an employer's offices. In other cases, public transportation will be used. Students will be responsible for the cost of their fare when using public transportation.
	Please sign below to give permission for your child to participate in these community field experiences.
	Student Name:
	I authorize my child to participate in the Industry Training Program community Field Experiences
Parent,	/Guardian Name: Date:
Signatu	re:



Industry Training Programs Student Self Evaluation Form

student Name:	
Please answer the following questions to the best of your ability. Please print	t clearly.
 How have you/are you preparing yourself for study and work in this industry? (e.g. volunteer experience, extra-curricular activities/courses, research, conversations v 	
2. What are some skills you have that will help you succeed in this field?	
3. What interests you about working in this industry?	
4. Describe what you will do to be successful in this program.	
5. Describe your attendance and work habits (at school and/or at work).	



Industry Training Programs Transition Plan

Students must complete a minimum of 80 credits in grades 10 - 12 to graduate with a Dogwood Diploma.

What are your short-term education goals for the next 6 months?
What are your long-term education goals for the next 1-5 years?
How does the program you are applying for fit into your career aspirations?
Participating in an Industry Training Program may mean travelling to other schools in the district or

Participating in an Industry Training Program may mean travelling to other schools in the district or attending a Post-Secondary Institute. This may impact your timetable. Please list the courses you plan on taking in your grade 11 & 12 years.

Grade 11	Grade 12



Industry Training Programs Career/Program Research

Using websites like SkilledTradesBC, BC Career Trek, myBlueprint or other sources (conversations with tradespeople or industry workers you know, etc), please answer the following questions.

For Youth Train in Trades Program Applicants only:
What is a Red Seal Certification and how do you earn one?
What is an apprenticeship?
For all Industry Training Program Applicants:
What types of tasks does a person working in the industry related to your program do?
What do immediate and long-range prospects look like in terms of employment in this field? Are work opportunities found locally, provincially, or elsewhere?





Reference Form #1- Teacher

Please provide a teacher reference from your current school. Select a teacher who best knows your practical skills and abilities.

Student Name: _____ Grade: _____

This student has applied for a seat in the following program:

rnis student has applied	TOT a Seat III the TO	nowing program	11.		
Referee Name:		Relationship to Applicant:			
Please check (\checkmark) the trai	ts most appropriat	e and frequentl	y demonstrated by t	his student:	
Attendance Work Ethic Communication (written & spoken) Maturity	Excellent	Good	Satisfactory	Needs Improvement	
Do you feel that this stud	dent follows establi	shed safety rule	es and safe work pra	ctices?	
Could this student be co	unted on to represe	ent the school c	listrict favorably in a	training setting i	
Do you feel this student	has a sincere intere	est in this progra	am?		
Please provide us with fu	urther comments o	n this student's	suitability for their (chosen program:	





Reference Form #2- Community Member

Please provide a reference from a member of the community (outside of school). Select a

someone who knows your practical skills and abilities. Student Name: _____ Grade: _____ This student has applied for a seat in the following program: ______ Referee Name: _____ Relationship to Applicant: _____ Please check (\checkmark) the traits most appropriate and frequently demonstrated by this student: Excellent Good Satisfactory Needs Improvement Attendance Work Ethic Communication (written & spoken) Maturity Do you feel that this student follows established safety rules and safe work practices? Could this student be counted on to represent the school district favorably in a training setting? Do you feel this student has a sincere interest in this program? Please provide us with further comments on this student's suitability for their chosen program:





Reference Form #3- Community Member

(only Early Childhood Education Assistant applicants must complete this page)

Please provide a reference from a member of the community (outside of school). Select a someone who knows your practical skills and abilities. Student Name: Grade: This student has applied for a seat in the following program: Referee Name: _____ Relationship to Applicant: _____ Please check (\checkmark) the traits most appropriate and frequently demonstrated by this student: Excellent Good Satisfactory Needs **Improvement** Attendance Work Ethic Communication (written & spoken) Maturity Do you feel that this student follows established safety rules and safe work practices? Could this student be counted on to represent the school district favorably in a training setting? Do you feel this student has a sincere interest in this program? Please provide us with further comments on this student's suitability for their chosen program: