

556 Boleskine Road, Victoria, BC, V8Z 1E8 Tel: (250) 475-4182 Fax: (250) 475-4115



# TASK Student Package

**Revised:** September 2017

# In addition to completing this application, please include the following:

- 1. Current Transcript
- 2. Attendance Record
- 3. Statement of Commitment (attached)

If you require further information, please call Lindsay Johnson, Career Programs at 250-475-4182

# GREATER VICTORIA SCHOOL DISTRICT # 61 TASK PROGRAM APPLICATION FORM

Student Name:	- i		
School:			
PEN #:	Student #:		
Home Address:			
Home Phone:	Cell:		
Email Address:			
Care Card #:			
Ministry Designation (if	applicable):		
	± ×		
Principal's Note of Reco	mmendation to TASK Program:		
	ncipal's Note of Recommendation to TASK Program:		
	Doto		
Principal Signature	Date :		
	Date :		
Parent Signature			
	Date :		
Student Signature			

### STATEMENT OF COMMITMENT

Please write a paragraph outlining why you wish to participate in the TASK program, what your commitments are to this program and what you are hoping to get out of it upon your completion.
Student Signature



### 2017 - 2018

### PROGRAM APPLICATION PACKAGE

Revised May 2017

Submit to your Secondary School Career Education Contact or Coordinator





















### SOUTH ISLAND PARTNERSHIP PROGRAM APPLICATION INFORMATION

### **GETTING STARTED**

- Students and parents meet with a school career coordinator/counsellor to discuss SIP program options.
- Visit our website: <a href="mailto:camosun.ca/learn/south-island-partnership">camosun.ca/learn/south-island-partnership</a>. Questions can be directed to your school career coordinator/counsellor or the SIP office (250-370-4827), email SIP@camosun.bc.ca).
- Important: college course(s) will be recorded on your permanent post-secondary file. Careful consideration is to be made when deciding to take a post-secondary program.
- Students should not take a post-secondary program unless they have met all the pre-requisites and are prepared to attend all classes and complete all assignments.
- Withdrawal Process: Students wishing to withdraw from a program must contact the SIP Office immediately.
- Individual Education Plan (IEP): Students with a learning condition or other disability which may require additional support services must make an appointment with the *Disability Resource Centre* before starting a program other than TASK (250-370-4049).

### **HOW TO APPLY (please complete all forms in ink)**

- See your school career coordinator/counsellor for assistance completing this package.
- Youth Train in Trades (YTIT) students will also fill out an Industry Training Authority (ITA) Apprentice/Sponsor registration form.
- Return the completed application package to your school career coordinator/counsellor for submission to SIP Office
- Apply to Camosun through applybc.ca see attached instructions
- Students are accepted based on meeting qualifications and date a complete application is received by the SIP office.
- Program applicants will be required to attend an interview/orientation. Students will be notified if qualified and accepted into the program.
- Where applicants exceed availability, a waitlist may be established.

### APPLICATION SUBMISSION CHECKLIST (please complete all forms in ink)

Ц	Complete Applybc online application and pay the application fee, good for 12 consecutive months for SIP program
	Signed and completed SIP Application Package including the Permission to Release Information Form
	Most recent transcript of marks
	English & Math Assessments, where applicable to meet pre-requisites
	Evidence of 30-hour related Work-Experience (employer evaluation or log book)
	Completed and signed Student Education/Transition Plan
	Attendance Record
	Completed and signed Responsibility Agreement AND Student Statement of Commitment forms

### NOTE:

- Only completed applications will be considered for available seats.
- Tuition fees will be paid by your school district.
- You are responsible for the non-refundable application fee, textbooks, equipment, supplies, and clothing.
- Fees may change without notice.

### **DUAL CREDIT PROCESS**

- Students will receive high school credits and grades on their high school transcript.
- Students will also receive college credit for the program. You need to apply for a college transcript to receive your report. http://camosun.ca/services/ documents/transcript-request.pdf

Program Acceptance Disclaimer: These programs may not be governed by Camosun College's policies on admission and academic progress and promotion.

### **FDUCATION PLANNER INSTRUCTIONS**

### FOR STUDENTS TAKING A DUAL CREDIT PROGRAM

### **Education Planner Instructions**

**NOTE:** Students applying for a program <u>MUST</u> first receive confirmation from the SIP office that they have secured a seat <u>before</u> registering through Education Planner.

- Go to <a href="https://apply.educationplannerbc.ca/">https://apply.educationplannerbc.ca/</a>
- 2. Sign up for an account creating your Username and Password as follows:
  - a. USERNAME: First Name.Last Name ex. Jane.Smith
  - b. PASSWORD: First initial, Last Name, a special character, and year of birth ex. Jsmith@1999

Once you have successfully created an account, you will automatically be logged in

- 3. Complete your Profile:
  - a. Personal Info
  - b. Contact Info (Select YES for emergency contact. Enter your parent/guardian information)
  - c. Academic History
- 4. Select your Institution Camosun College
- 5. At the Program Selection,
  - a. select the Category South Island Partnership,
  - b. select your subject area Business, Science or Technology etc.
  - c. select your program/course Dual Credit Courses South Island Partnership
- 6. Under Additional Information, select "NO" for Agent information for international applicants
- Review and Submit application the last step is to pay.
   If needed, you can save your information and return using your USERNAME and PASSWORD when you have access to a credit card
- 8. Pay the application fee.

This is non-refundable, and valid for a continuous 12 months for South Island Partnership courses.

Please note that you will have to pay the application fee again if you switch from a course to a different program or when you graduate and apply again for a new program

9. Submit online application, notify career coordinator it's complete.

**Note:** The online application is only one part of your registration process. You will also need to complete a South Island Partnership application package provided by your Teacher or Career Coordinator.

### Are you having trouble?

Go to: camosun.ca/learn/south-island-partnership

Select: Become a Dual Credit Student

Click: How to Apply for SIP on Education Planner



Student Name: \_\_\_



# PERMISSION TO RELEASE INFORMATION & AUTHORIZATION TO ACT ON MY BEHALF

The British Columbia Freedom of Information and Protection of Privacy Act provides that the college may not release any information pertaining to student records to anyone other than the student owner of the record without the student's consent.

Further, the college does not normally allow any person other than the student to conduct student-related business with the College on behalf of the student.

In order to allow the South Island Partnership and your parent(s)/guardian(s) to conduct student-related business on your behalf, you must complete and submit this form as part of the SIP application package.

Legal Last Name (p	rint) Le	gal First Name (print)	Preferred Fir	rst Name (print)
Gender: Male □ Female □	Date of Birth:		S.I.N.:	
Email:	Phone	e:	PEN #:	
To the Registration Departme	nt and the South Island	l Partnership:		
The following secondary school				
and Parent(s)/Guardian(s) (please p	orint)			
have permission for the following ac student-related business on my beh				ecords and conduct
Student Signature:		-		
Do you have an IEP (Individual Educ services? (Y/N) *if yes, please CITIZENSHIP: Please select your offi Canadian (Y/N) OR Permaner International (Y/N) *if yes, inclu Indigenous (Y/N) *if yes, please	make an appointment with the icial status in Canada and a at Resident ( <b>Non-Canadian</b> ) de copies of visa & passport in	e Disability Resource Centre (we tach documentation to this (Y/N) *if yes, provide conformation stapled to your appliance.	www.camosun.ca/drc) s form opy of card front & bac lication package	:k
SIP PROGRAM SELECTION	ON (e.g. Joinery)			
Program		SECTION NUMBER (Office to	Jse)	COURSE START DATE
Program		SECTION NUMBER (Office U	Jse)	COURSE START DATE
SECONDARY SCHOOL (HIGH S	SCHOOL) INFORMATION			
GRADE CURRENTLY ENROLLED IN		SD#		EXPECTED GRADUATION DATE
TEACHER / COUNSELLOR NAME (plea	se print):	APPROVAL (signature):		DATE



### **RESPONSIBILITY AGREEMENT - PROGRAMS**

High School/School District, SIP, and Camosun Responsibilities

### We will:

- provide tuition funding for program training at Camosun College (Students are responsible for the application fee and course materials
- inform you of the training requirements specific to your career area and provide you with background information on requirements for Camosun College
- assist you to meet all prerequisites and create an Education/Transition Plan that maps your final years of high school
- help you to complete a SIP application package and submit it to SIP 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 Disability Resource Centre of specific learning needs and IEPs (make an appointment with our DRC by calling 250-370-4049 INT. /250-370-3312 LANS.)
- liaise with your parents, high schools teachers, and Camosun instructors regarding your college progress and participation
- provide post-secondary marks to your high school for graduation credits

### Student Responsibilities

As	a South Island Partnership student, I agree to:			
	undergo a relevant work experience placement in my chosen program area			
	successfully meet all prerequisites before attending Camosun			
	participate in a Math or English upgrading program/assessment if deemed necessary understand that punctuality and attendance are mandatory at Camosun			
	submit a completed application package and register through APPLYBC			
	attend a SIP orientation when invited			
	purchase required text books, support materials, equipment, and clothing			
	contact my instructor and the SIP office (250-370-4827) immediately if I will be absent or late			
	follow the Camosun College Student Conduct Policy (refer to http://www.camosun.bc.ca/learn/becoming/policies.html			
	respect that my home school Code of Conduct applies to all courses and programs  respect, compliance, and effort are required at all times			
	meet program homework and study expectations (2-4 hours daily)			
strive to achieve a passing mark of at least 70% in my program				
inform my Camosun instructor and my school career coordinators of withdrawal from my courses as soon as possible				
	understand that failure to withdraw in advance of 66% of program completion may result in an "F" on both my high school and post-secondary transcripts; (withdrawal must occur before the final third of the course begins)			
	be aware that if I require an extension, I will be responsible for both tuition and student ancillary fee payment			
	understand that it is recommended that students attend after-session tutorials offered by the instructor			
Stı	udent Name (please print clearly):			
Stu	udent Signature: Date:			
Pa	rent/Guardian Name (please print clearly):			
Pa	rent/Guardian Signature:Date:Date:			
Ca	reer Counsellor Name:			
His	oh School:			



### STUDENT STATEMENT OF COMMITMENT

Students applying to take a program must complete this form. Student Name: \_\_\_\_\_ Date: \_\_\_\_\_ (please print clearly) Describe why this is the career area for you. Describe how your work experience or school activities have prepared you for this program. Describe what you will do to be successful in this program.

Date: \_\_

Student Signature:



# STUDENT EDUCATION/TRANSITION PLAN



Develop your Education/Transition Plan. Include courses required for entry into the program you will participate in while attending Camosun College.

Name:			High School:			Date:		Ĩ
<ol> <li>Ensure you have included and considered your graduation requirements in your Education/Transition Plan.</li> <li>You may need to modify your timeline to achieve your graduation requirements &amp; participate in the program.</li> <li>Complete the 3-Year Education/Transition Plan in full, beginning with your Grade 10 courses.</li> <li>Timetable changes should be made with the approval of your school's Career Coordinator/Counsellor.</li> <li>Include any Dual Credits and SSA Credits in your predicted credit count.</li> </ol>	and considered our timeline to a cation/Transitior 1 be made with t	your graduation Inchieve your grad In Plan in full, beg The approval of your predicted	requirements in your E uation requirements & inning with your Grade our school's Career Coc credit count.	ducation/Trans participate in tl 10 courses. ordinator/Couns	ition Plan. ne program, ellor.			
Students are required to complete a minimum of <b>80 credits</b> (equivalent to 20 four-credit courses) in Grades 10 12 for graduation. Most students choose to complete more than 80 credits.	ste a minimum o	of <b>80 credits</b> (equents choose to co	ired to complete a <u>minimum</u> of <b>80 credits</b> (equivalent to 20 four-credit cours 12 for graduation. Most students choose to complete more than 80 credits.	it courses) in Gr credits.	ades 10 -	2. Elective Co	2. Elective Courses – 28 credits	9
1. Required Courses - 52 credits in courses listed below:	s in courses list	ed below:				Students car	Students can choose to complete elective	שַ
Course	Credits	S Course			Credits	requirement	requirements through a Dual Credit	
English 10	4	English 11			4	I ransition pa	I ransition pathway offered by the South	
Fine Arts or Applied Skills 10, 11,	12	Social Stud	Social Studies 11, Civics 11, First Nations 12	Nations 12	4	Island Partnership	ership	**
Science 10	4	Mathematics 11 or 12	s 11 or 12		4	Transition Dathway	thwa.	
Mathematics 10	4	Science 11 or 12	or 12		4		ulway.	4
Physical Education 10	4	English 12	English 12 or English First Peoples		4	n Business	☐ Business ☐ Communications ☐ Realth	
Planning 10	4	* Graduatic	* Graduation Transitions 12		4	□ Science □	☐ Science ☐ Technology ☐ Trades	
Social Studies 10	4						3	
Note: Graduation =	Minimum 4 Gra	de 12 level cours	Note: Graduation = Minimum 4 Grade 12 level courses + * Graduation Transitions 12	nsitions 12		Specific Care	Specific Career/Occupation:	
Year	Year			Year			Year	
Gr 10		Gr 11	Gr 11	Gr 12		Gr 12	Transition Pathway	
	22.	Sem 1	Sem 2	Sem 1		Sem 2	Sem 1 Sem 2	
						1.0		
Total Credits:	Tota	Total Credits:		Total Credits:			Total Credits:	
Total Credits Predicted (Required + Elective)	1 + Elective) =	٠	Predicted Graduation Date:	Date:				
Teacher/Counsellor (Print Name)	le)			Parent/Guardian (Print Name)	lian (Print N	ame)		
Teacher/Counsellor Signature				Parent/Guardian Signature	dian Signat	ıre		
							7.00	
Student Signature								



### SIP Program Application Attendance Report

SIP programs at Camosun are full time and are generally one to two semesters in length. Therefore, it is easy to understand why the attendance is a crucial element to be successful in any SIP program.

Students applying for entry into any SIP program offered by the south Island Partnership are required to submit a school attendance report for the current and previous school semester as part of their SIP Program Application

Student attendance reports can be printed by your school Career Teacher or Counsellor using the MyEd record keeping system.

Please staple your attendance report to the completed SIP Application Package.





**ITA Customer Service** 800 - 8100 Granville Avenue Richmond, BC V6Y 3T6 Tel: 778-328-8700 Toll Free: 1-866-660-6011

## 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:	☐ Female	Personal Education Number (PEN):		
*Suite Number:	*Mailing Address:				
*City:	*Province:		*Postal Code:		
*Phone Number:	Secondary Phone Numl	ber:	*Email Address:		
*Do you identify yourself as an aborigin First Nations ☐ Métis ☐ Inuit ☐	al person? ☐ Yes ☐ No	0			
B. Parent/Guardian's Information			ş		
Ĭ	/		- anablatica diam		
of	(print surname folio	owed by given names of	parent guardian)		
(street address)		(city, town)	(postal code)		
Declare that:					
1. I am the ☐ custodial parent ☐ legal guard	ian of the minor named ab	ove; and,			
I authorize the school to release the informatudent with the ITA in a Youth Trade progran	ation outlined in Sections An; and to use the registration	A & B to Industry Ton information for	raining Authority for the purpose of registering the statistical data.		
3. I understand that I can only withdraw this consent by written request addressed to the school.					
Daniel Constitution in Circumstance			Date (MM/DD/YYYY)		
Parent/Guardian's Signature:			Date (MINIDD/1111)		
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) ☐ Youth Explore Trades Sampler (partnered with		ate (MM/DD/YYYY	/): Program End Date (MM/DD/YYYY):		
Partnering Training Provider for Youth Expl	ore Trades Sampler:		!		