



**CO-OPERATIVE EDUCATION CADET PROGRAM
SUMMER SEMESTER 2018 - REGISTRATION FORM**



**July 3 to August 10, 2018
Registration Deadline is June 29th**

A. STUDENT INFORMATION		Please Print Clearly
Surname _____	First Name _____	Initial _____
Address _____		
Civic# and Road/Street Name	City and Province	Postal Code
Home Phone _____	Alternate Number _____	
Date of Birth _____ / _____ / _____	Current Grade _____	
MM DD YYYY	<input type="checkbox"/> Female <input type="checkbox"/> Male	Age _____
Student Email _____	Parent/Guardian Email _____	
Unit # _____	Unit Location _____	
B. CO-OPERATIVE EDUCATION COURSE LINK		
<p>The related in-school curriculum course on which your COOP credit will be based. For summer semester programming this related course must be one which you have successfully completed by June 29, 2018. Summer co-operative education courses may not be taken concurrently with a related course. In most cases, the linking course will be GLC 20 - Career Studies,</p>		
<p>Career Studies - GLC 20 _____ / _____</p>		
Course _____	Month/Year Completed _____	
Is the student part of a SHSM	<input type="checkbox"/> YES <input type="checkbox"/> NO	If YES, which SHSM:
C. PLACEMENT/ TRAINING LOCATION		<input type="checkbox"/> COURSE <input type="checkbox"/> STAFF
<p>What is your anticipated training centre for your summer placement? Please include training course:</p>		
<p><input type="checkbox"/> Blackdown Cadet Training Centre (Blackdown CTC)</p>		
<p><input type="checkbox"/> Connaught Cadet Training Centre (Connaught CTC)</p>		
<p><input type="checkbox"/> HMCS Ontario Cadet Training Centre (HMCS ONTARIO)</p>		
<p><input type="checkbox"/> Regional Gliding School (Centre) (RGS(C))</p>		
<p><input type="checkbox"/> Trenton Cadet Training Centre (Trenton CTC)</p>		
<p><input type="checkbox"/> Advanced Aviation Technology Courses at Canadore College (AATC - Canadore)</p>		
<p><input type="checkbox"/> Power Pilot Scholarship</p>		
<p><input type="checkbox"/> Advanced Aerospace Course (AAC), St Jean sur Richelieu</p>		
D. HOME SCHOOL INFORMATION		
<p>This opportunity is open to cadets from any School Board within Ontario from Grades 9 to 12 with a minimum of 6 secondary credits</p>		
School Name _____	School Board _____	
School Address _____		
Student OEN# (Required) _____		
Guidance Teacher Signature: _____	Date: _____	
E. PARENT/GUARDIAN APPROVAL - If cadet is under 18 years of age (PLEASE PRINT)		
<p>I approve my child/dependant participating in the Summer Semester Cadet COOP Program and certify that the above information is correct</p>		
Parent/Guardian _____	Surname	First Name
(Please Print)		Date
Parent/Guardian Signature: _____	Student Signature: _____	
F. CO APPROVAL		
<p>I certify that this cadet is a member of my unit and is in good standing and will be conducting summer training.</p>		
CO Name and Rank: _____	CO Signature: _____	



CO-OPERATIVE EDUCATION CADET PROGRAM

SUMMER SEMESTER 2018 STUDENT INFORMATION FORM

Please Print Clearly



INSURANCE

The Ministry of Education provides insurance for all cooperative education students (whose work placement is not in a school) through the Ontario Workplace Safety Insurance Board. While on cadet activities, the appropriate cadet league also provides insurance coverage. Parents/guardians are encouraged to provide additional insurance for students.

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY

Pursuant to the Municipal Freedom of Information and Protection of Privacy Act, the personal information collected for the purposes of cooperative education programs is collected under the authority of the Education Act, and will be used for the ongoing administration of appropriate cooperative education work placements and programs.

PUBLICATIONS, DISPLAYS, PHOTOGRAPHS, FILMS, VIDEOTAPES, STUDENT WORK, ACHIEVEMENTS, AWARDS, PARTICIPATION

Permit Do Not Permit (please check one)

The Upper Canada District School Board and/or any of its schools to reproduce or display printed materials such as photographs, video images, articles or publications relating to or involving my child, including name, grade and school identification, which may be used in internal communications within the school and the Board or may be the subject of interest to local, regional or national media.

Permit Do Not Permit (please check one)

The Upper Canada District School Board and/or any of its schools to reproduce or display on the Internet, any images, articles or student work relating to or involving my child, including name, grade and school identification, which may be used in internal communications within the school and the Board be the subject of interest to local, regional or national media.

I understand that in authorizing the release of such information, I am releasing any claim to protection of personal privacy of my child which I am entitled to under the provisions of the Municipal Freedom of Information and Protection of Privacy Act.

I understand my PER or course report and other related information will be shared with the Upper Canada District School Board (UCDSB) for student evaluation purposes. I further understand the UCDSB will maintain confidentiality with these records at all times.

Note: A student enrolled in a cooperative education program cannot apply hours accumulated at his or her placement in addition to those required for credit to fulfill the community involvement expectation of the Ontario Curriculum.

The Co-operative Education Teacher will:

- monitor the student's activities and progress at the work placement on a regular basis by visits, phone calls, email and other appropriate forms of communication;
- assess and evaluate the student's progress in the program, and thereby determine his or her final grade.

I have carefully read the above information and agree to abide by these requirements:

I agree to have this student participate in the co-operative education program as described:

Student signature

Date

Parent/Guardian

Date

- Registration will not be accepted unless parts A, B, C, D, E, and F are completed
- Complete, print and sign this form and bring to your Guidance Counsellor for your OEN
- Scan this form and email to: CadetSummerCoop@ucdsb.on.ca