

Dual Credit Program Application

PLEASE PRINT CLEARLY USING A BLACK OR BLUE PEN

INSTRUCTIONS FOR THIS PACKAGE ARE INCLUDED ON THE LAST PAGE

		S	TUDENT IN	FORMATIO	N					
Legal LAST Name (family name)		Legal FIF	RST Name (given	name)		Middle Name(s	5)			
PEN#		Student Number Birth Date (DD/MM/YYY					/MM/YYYY)	Current Grade		
Mailing Address (number and stre	eet)	I				Gender Pronoun (he/she/they/ze)				
City and Postal Code		Student	Cell Phone			Student email				
Home Phone		Parent P	hone			Parent email				
Counsellor Name		School N	lame			Grad Date (MM,	/YYYY)			
		ADDI	TIONAL ST	UDENT DE	ΓAILS					
Driver's License (select one)		Citizensh	nip (select one)			Indigenous				
☐ "L" Driver ☐ "N" Drive	r None	☐ Cana	ndian 🗆	Permanent Resid	dant (PR)		Yes N	0		
_ E Blivel _ IN Blive	i i i None		udent must be or		. ,	Social Insuranc	ce Number (to con	firm eligibility)		
BC Care Card #		Family Doctor Doctor Phone								
Describe any medical/physical conditions that the school should be aware of or that might affect performance (e.g., diabetes, epilepsy, asthma, allergies, previous physical injuries, etc.) To meet student needs, please ensure current documentation/assessment information is attached.										
Emergency Contact	Home Phor	Home Phone Cell Phone Relationship to Stude					dent			
Describe any special needs that the school should be aware of or that might affect program performance and/or participation (e.g., learning disability, ADD/ADHD, physical disability, etc.) To meet student needs, please ensure current documentation/assessment information is attached.										
APPLICATION ACKNOWLEDGEMENT										
Parent/Guardian Acknowledgem										
YES NO I grant my child permission to participate in this Dual Credit Program with the Vancouver School District and the Post-Secondary program partner and that the information contained herein will be provided to the instructor.										
YES NO I hereby grant permission to VSB personnel to take photographs of my child. These pictures may be used in Career Programs publications and on the VSB website at any time for the purpose of promotion and celebration of student success.										
YES NO I understand and hereby agree to the Student Transition Plan										
YES					idential basis.					
Parent/Guardian Name	•		Guardian Signatu			Date (DD/MM/Y				
Student Acknowledgement – I certify that all the statements made on this application are true and complete.										
Student Signature				Date (DD/MM/\	YYY)					
For Career Programs Office use	•				Date Red					
☐ Entered in DCMS [Resume Attach	ed	☐ DVR/GSUR	Attached	☐ Desig	gnation	Program			

Dual Credit Program Application

Please place a checkmark in the box of the program(s) you are applying for below. Students can apply for more than one program

Tuition for Dual Credit programs is funded by the Vancouver School District (SD39) for students whose application is accepted. **Program and student fees are payable by the student and are NOT funded by SD39.** These include a variety of college fees such as student union, U-Pass, uniform, PPE, tools, textbooks, etc. Estimated approximate costs are noted below.

Early Childhood Educator – Langara College September – May Supplies, textbooks, U-Pass, and equipment	\$800
Health Care Assistant – Vancouver Community College (I September – May Supplies and equipment	Broadway) \$1500

Next Steps:

Students will be contacted for an interview after the application deadline has passed. Late applications are welcome but may be considered after those submitted prior to the deadline. If you are accepted into the program, you must:

- follow the instructions in your acceptance letter
- return any documents to be signed
- meet with your Counsellor to make the appropriate changes to your timetable
- attend the mandatory students and parent orientation night

,, ,,	, , , , , , , , , , , , , , , , , , , ,	I fees above are the student's responsibility and are determined by the post-secondary institution
Parent/Guardian Name	 Parent/Guardian Signature	Date (DD/MM/YYYY)

Student Name:
Please answer the following questions to the best of your ability. Please print clearly.
Career Information
Describe the tasks and expectations involved in this field, including the physical demands and working
conditions.
Future Outlook
What do immediate and long-range prospects look like in terms of employment in this field? Are work
opportunities found locally, provincially, or elsewhere?
Potential Earnings
What are the average earnings of workers in this field? Is the work: full-time; part-time; year-round; or
seasonal?
Seasonat.

Website Resources:

PROGRAM RESEARCH

- myBlueprint https://myblueprint.ca (see your counsellor for login information)
- https://educationplannerbc.ca
- www.workbc.ca (click on 'Start Your Career Trek')

Program: _____

STUDENT STATEMENT OF INTEREST AND COMMITMENT

Student Name:
Please answer the following questions to the best of your ability. Please print clearly.
1. What have you done to prepare yourself for study and work in a skilled trade? (e.g., related job or volunteer experience, extra-curricular activity or courses, reading, interviews with people, etc.)
2. Explain the skills/talents you have that will help you succeed in the world of work.
3. What interests you most about a career in a skilled trade?
4. Tell us about your interests outside of school (e.g., hobbies, sports, clubs, special talents, etc.)
5. Describe what you will do to be successful in this program.
6. Tell us about your attendance and punctuality (at school and/or at work).

STUDENT TRANSITION PLAN

Student Name:				
Students are required to complete a minimum of 80 cr your transition plan, please ask your counsellor or adn Diploma Verification Report and Grad Status Update R	ninistrator to attach a recent copy of <u>both</u> your			
Please ensure that you have considered your graduation	on requirements in your Transition plan.			
Education/Career Goals				
List three short-term Education/Career Goals (6-12 mo. 1. 2.	nths)			
3.				
List three long-term Education/Career Goals (1-5 years 1. 2. 3.				
Where do you see yourself in 5 to 10 years?				
What specific career do you see yourself attaining by	your successful completion of this program?			
Transition Disp Asimonia despesa				
If the program applied for is followed and all courses graduate in June (year of graduation) with a	•			
School Counsellor Signature	Parent/Guardian Signature			
Student Signature	Date (DD/MM/YYYY)			

SCHOOL RECOMMENDATION

Pleas	se have a School Counsel	lor or an Administrator from y	our school comp	lete this page.		
Stud	Student Name: Grade:					
This	student has applied for a	Dual-Credit program:				
Prog	ram Name:					
	nformation in this recom k all that apply.	mendation will be used to hel	p determine the s	student's suitability. Please		
	The student's parent(s I have interviewed this program/trade, its pur Current documentation I have reviewed the study We have reviewed cos	enstrated interest in the programs)/guardian(s) has/have shown student and believe the stude pose, its implications for graden of any learning or medical dudent's completed application as associated with the program or costs of textbooks, equipments	n an interest and sent has a clear undustion, and conditionability is providing package.	derstanding of the itions for acceptance. led, if applicable.		
Pleas	se rate this student's suita	ability and readiness for a You [.]	th EXPLORE Trade	es program:		
	EXCEPTIONAL	STRONG	G ACCEPTABLE			
Pleas	se provide us with any fur	ther comments:				
Reco	ommendation completed	by:				
Nam	·		nistrator	Counsellor		
Sign	ature:	Date (DD)	/MM/YYYY):	Telephone:		

TEACHER REFERENCE FORM

-		w your practical skills and a	ıbilities m							
Student Name: Grade:										
This student has applied	for a Dual Credit progra	am.								
Please assess this stude	ent based on your obser	vations and interactions in a	n ADST/el	lective cou	ırse.					
4 exceeds expectations	3 meets expectations	2 minimally meets expectations	not yet m	1 leeting expec	tations	4	3	2	1	n/a
Daily attendance and p	unctuality	,		<u> </u>						
Work ethic and attitude										
Takes initiative, motivat	ed, effective work habit	IS .								
Ability to follow instruct	ions									
Attention to details										
Decision-making skills										
Ability to work with other	ers									
Ability to read technical	drawings/manuals									
fellow students? 2. Please comment of	on this student's written a	nd spoken communication skill:								
		echanical ability and hand-eye		on.						
Do you feel that this stude	nt follows established safe	ety rules and safe work practices	?	YES	☐ PO:	SSIBL	Y	□N	0	
Could this student be coursetting?	nted on to represent the so	chool favorably in a training or v	vork	YES	PO:	SSIBL'	Y	□N	0	
Do you feel this student has a sincere interest in this program?				☐ PO	SSIBLY NO					
Would you like a private conversation about this student?				□NO						
Please provide us with furth										
Recommendation compl	eted by:									
Name:		Subj	ect area:					_		
Signature:		Date	:					_		
Telephone:										

Teachers can send this form directly to Career Programs via email or the blue bag. It is not necessary to provide a copy to your student.



Instructions for Dual Credit Application

 Step 1 - Gather information Meet with your school Counsellor to get an understanding of the programs, when they will occur, and how it may impact your graduation plan. Find out more about the career through work experience, job shadowing, volunteering, or networking.
Step 2 – Complete the application pages
 Student information, details, and application acknowledgement Choose the program(s) you're applying to Understand and plan to fund the program fees Program Research Statement of Interest and Commitment Student Transition Plan
Step 3 – Request Teacher/Counsellor References
 School Recommendation (Counsellor or Administrator) Teacher Reference (ADST/elective teacher strongly preferred)
Note: these references can be sent separately and directly to careerprograms@vsb.bc.ca.
Step 4 – Attach additional required documents
 □ Grad Status Update Report (request from Counsellor) □ Diploma Verification Report (request from Counsellor) □ Current documentation of any medical or learning disabilities □ Resume
Step 5 – Submit Application
 Provide your completed application to your school Counsellor or Administrator Ask your Counsellor or Administrator to review the application and submit it to Career Programs (by Blue Bag to Career Programs) or by email to careerprograms@vsb.bc.ca
Please note: Dual Credit program requirements – Students must: - be a Canadian citizen or Permanent Resident - be enrolled in a Vancouver School District school - be going into grade 11 or 12 (not graduated) - meet academic standard required for specific program - intend to complete secondary school graduation requirements - obtain licenses/certificates required by training providers/employers (e.g., Driver's License, FOODSAFE, WHMIS, etc.) Application submission – Please ensure you: - complete the checklist above before submitting - send your application to Career Programs as per instructions above - submit by deadline (either December 1st or March 1st)

Please note that incomplete applications will be returned.