



# Youth WORK $\Rightarrow$ Youth TRAIN Application

for use by students working in a registered apprenticeship

PLEASE PRINT CLEARLY						
STUDENT INFORMATION						
Name:TWID:	Email:					
	Birthdate (DD/MM/YYYY):/					
	ate (MM/YYYY): School Counsellor:					
Applicant's Signature: I certify that all statements in this applic						
Date (DD/MM/YYYY):	Signature:					
APPLICATION CHECKLIST Place a check mark beside each step when co	omplete					
Step 1: Gather Information						
•	understanding of their training expectations, the timing of your					
training, and how to request the time off work.						
Use sites like Trades Training BC to identify when and	d where your Level 1 Apprenticeship Training could be offered.					
Step 2: Complete and attach the following						
Application Checklist	Employer Recommendation					
Understand and plan to fund any Program Costs	Teacher Reference (for current grade 12s only)					
Training Request	Current documentation of any medical or learning designations					
Training Planning	SkilledTradesBC Transcript showing reported hours					
Personal Information	Current Resume					
Step 3: Submit Application						
Do a thorough check of your application to ensure th	nat it is complete and correct					
Forward the application package to Career Programs	s by emailing it to careerprograms@vsb.bc.ca					
Youth TRAIN in Trades Level 1 Apprenticeship programmi • be a Canadian citizen or Permanent Resident	ing requirements – Students must:					
<ul> <li>have been most recently enrolled in a Vancouve</li> </ul>	er School District school					
meet academic standard required for specific program						
<ul> <li>have completed 900+ hours of reported apprenticeship hours at the time of training</li> </ul>						
• obtain licenses or certificates required by training providers and/or employers (e.g., Driver's License, FOODSAFE, WHMIS, etc.)						
Application submission – Please ensure you:						
<ul> <li>complete the checklist on page one before submitting</li> <li>send your application to Career Programs as per instructions above</li> </ul>						
• submit at least 3 months prior to anticipated sta	<ul> <li>submit at least 3 months prior to anticipated start date</li> </ul>					
Please note that incomplete applications will be returned.						
For office use only Received:						
Entered DCMS Resume Attached Di	DiplomaVerification Report Designation Program					

# Youth WORK $\Rightarrow$ Youth TRAIN Application

Please place a checkmark in the box of the program(s) you are applying for below.

Tuition for Youth TRAIN in Trades programs may be 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.

Auto Service Technician – (VCC Broadway) Student fees, supplies and equipment	\$750	Carpenter – (BCIT Burnaby) Student fees, supplies and equipment	\$1,200
Electrician – (BCIT Burnaby) Multiple start dates Student supplies, textbooks and tools	\$900	<b>Heavy Mechanical Trades Technician – (BCIT Bur</b> Student fees, books, and equipment (Tools and optional textbooks are not included)	r <b>naby)</b> \$1,000
Marine Mechanical Technician – (BCIT Annacis Island) Student supplies, textbooks and equipment	\$600	Plumber (Piping Industry College of BC Annacis I June – August (Application Deadline is December Student fees and equipment	•
I'm applying for a program not listed above			
Name of Program/Trade:			

#### **Next Steps:**

Students will be contacted for to review the application once it has been received. We discourage applications submitted less than 3 months prior to the desired start date as seat availability may be restricted. If you are accepted into the program, you must:

- follow the instructions in your acceptance letter
- return any documents to be signed
- keep in frequent contact with your Career Programs teacher regarding training planning
- attend the mandatory student orientation night

By providing your signature below you are acknowledging the additional fees above are the student's responsibility and are not funded by the VSB. Fees listed above are subject to change and are determined by the post-secondary institution.

Parent/Guardian Name

Parent/Guardian Signature

Date (DD/MM/YYYY)

Student Name

Student Signature

Date (DD/MM/YYYY)

## **TRAINING REQUEST**

Please provide details of the training institution and intake dates you're requesting. For programs offered at BCIT, please include the intake number.

Trade Name:	Institution:
Start date:	End date:
For BCIT programs, what is the intake number*? *this information is available at <u>https://www.bcit.ca/appre</u>	enticeship/students/training/

Have you already reserved a seat? \_\_\_\_\_ (Yes/No)

## **TRAINING PLANNING**

Trade: \_\_\_\_\_

Student Name:\_\_\_

Go to the website(s) listed in each section to answer each question.

# 1. SkilledTradesBC- Visit www.skilledtradesbc.ca How many levels of training are required for certification in your trade? Is this trade a 'Red Seal Trade' or does it lead to a 'Certificate of Qualification'? How many work-based training hours are required for certification in your trade?

#### **2.** Trades Training BC– Visit **tradestrainingbc.ca**.

Choose your trade from the 'Program,' select the 'Apprentice' option, and click 'Find My Seat!'

What institutions offer Level 1 training in your trade?

Which institution do you plan to attend?

PERSONAL INFOR		Name of Program	(s) applying to.	Legel Legt News (family serve)	
Legal First Name (given na	ame)	Middle Name		Legal Last Name (family name)	
PEN#		Grade	Age	Birth Date (DD/MM/YYYY)	
Student Cell Phone		S.I.N # (required	for post Youth Train purposes)	Student email	
Mailing Address (number a	and street)			City and Postal Code	
Home Phone		Parent Phone		Parent email	
Driver's License (select on	le)	Citizenship (selec		(PR) Indigenous Yes No	
"L" Driver "N" Driv	er None	(Student r	nust be one of the these to apply	Gender Pronoun (he/she/they/ze)	
BC Care Card #		Family Doctor	Doctor Phone	Doctor Address	
medications, etc.) Emergency Contact	I .	Home Phone	Cell Phone	Relationship to Student	
		iome i none	Cell Thone		
1. Parent/Guardian S Yes No	Signature. Please d	check YES or NO for each bo	)X.		
	A. I grant my child permission to participate in this Dual Credit Program with the Vancouver School District and the Post-Secondar program partner and that the information contained herein will be provided to the instructor.				
				ny child. These pictures may be used in Career Programs romotion and celebration of student success.	
	C. I understan	d and hereby agree to the Si	tudent Transition Plan		
	D. I hereby grant permission to VSB personnel to:				
	obtain information and/or records from other appropriate agencies				
	release information and/or records to other appropriate agencies				
	•	discuss pertinent information	with representatives from ap	propriate agencies on a strictly confidential basis.	
Parent/Guardian Name		Parent/Guar	dian Signature	Date (DD/MM/YYYY)	
	I certify that all state	Parent/Guar ements made on this application	-	Date (DD/MM/YYYY)	

### **EMPLOYER RECOMMENDATION**

*Please have a supervisor, foreperson, or Human Resources employee complete this page.* 

Applicant:		Grad Year:
This apprentice has applied for a seat in a You in Trades apprenticeship in the following trac		n, having already been working in a Youth WORK
Trade/Program Name:		
The information in this recommendation will technical training. Please check all that apply	•	he student's suitability and readiness for Level 1
The apprentice has demonstrated inte The apprentice's parent(s)/guardian(s) I have discussed training plans with thi program/trade, its purpose, and its in The apprentice has had reasonably cor I have reviewed the apprentice's training I have reviewed the process for request apprentice.	) has/have shown an interest is apprentice and believe the nplications for income and a nsistent attendance at work. ng plan.	e apprentice has a clear understanding of the dvancement.
Please rate this apprentice's suitability and re	eadiness for Level 1 technica	l training:
EXCEPTIONAL	STRONG	ACCEPTABLE
Please provide us with any further comments	5:	
Recommendation completed by: Name:		
		Telephone:

If you prefer, this form can be sent directly to VSB Career Programs via email – careerprograms@vsb.bc.ca.

#### TEACHER REFERENCE FORM - only required for students currently in their grade 12 year

Please have a Vancouver School Board teacher who knows your practical skills and abilities complete this form.

Student Name: Grade:

This apprentice has applied for a seat in a Youth TRAIN in Trades program, having already been working in a Youth WORK in Trades apprenticeship in the following trade:

#### Program Name: \_\_\_\_\_

Please assess this student based on your observations and interactions.								
4 exceeds expectations	4 3 2 1 1 exceeds expectations minimally meets expectations not yet meeting expectations						1	n/a
Daily attendance and punctu	ıality							
Work ethic and attitude								
Takes initiative, motivated, effective work habits								
Ability to follow instructions								
Attention to detail								
Decision-making skills								
Ability to work with others								
Ability to read technical drav	vings/manuals							

#### Please briefly comment upon the student's traits/characteristics, based on your interactions.

- 1. How have you seen this student display interpersonal skills, empathy, and the ability to deal with stressful situations in relation to fellow students?
- 2. Please comment on this student's written and spoken communication skills.
- 3. How has this student demonstrated their mechanical ability and hand-eye coordination?

	(DD/MM/YYYY)	(DD/MM/YYYY)					
Signature:		_ Telephone:					
Name:	Subject area:						
Recommendation completed by:							
Please provide us with further comments:							
Would you like a private conversation about this student?	Yes	No					
Do you feel this student has a sincere interest in this program?	Yes	Possibly	No				
Could this student be counted on to represent the school favorably in a training or work setting?	Yes	Possibly	No				
Do you feel that this student follows established safety rules and safe work practices?	Yes	Possibly	No				

Teacher – Please send this form directly to Career Programs via email or the blue bag. It is not necessary to provide a copy to your student. Thank you.