



CAREERS CO-OP APPLICATION

Approved Y/N

List the Apprenticeship Program(s) you are applying for:

(OFFICE USE ONLY)

APPRENTICESHIP PROGRAM APPLYING FOR (IN ORDER OF PREFERENCE)

1	
2	HAVE YOU BEEN PREVIOUSLY INDENTURED IN ANY TRADE IN ALBERTA? <input type="checkbox"/> YES <input type="checkbox"/> NO
3	

PROGRAM LOCATION (IF OUTSIDE OF FORT MCMURRAY)

Conklin Fort Chipewyan Anzac
 Janvier Fort McKay

CAREERS Office

Box 72
 8115 Franklin Ave
 Fort McMurray, AB
 Canada
 T9H 2H7

Tel (780) 792-5636
 Fax (866) 317-1466

Website
www.nextgen.org

E-mail
fortmcmurray@nextgen.org

Personal Data

HAVE YOU PREVIOUSLY APPLIED TO Careers? <input type="checkbox"/> Yes <input type="checkbox"/> No		IF YES, WHICH YEAR?	WERE YOU A RAP STUDENT? <input type="checkbox"/> Yes <input type="checkbox"/> No	ALBERTA EDUCATION ID #
LAST NAME		FIRST NAME (LEGAL)		MIDDLE NAME (LEGAL)
FORMER/MAIDEN NAME (IF ANY)		PREFERRED NAME		GENDER <input type="checkbox"/> Female <input type="checkbox"/> Male
BIRTHDATE (YYYY/MM/DD)		E-MAIL ADDRESS		

PERMANENT ADDRESS (Please notify CAREERS office as soon as possible of any changes)

STREET or PO BOX ADDRESS			
CITY	PROVINCE	COUNTRY	POSTAL CODE
HOME PHONE (+ AREA CODE) ()	CELLULAR PHONE (+ AREA CODE) ()	FAX (+ AREA CODE) ()	OTHER
EMERGENCY CONTACT PERSON		EMERGENCY CONTACT PERSON'S ADDRESS	
RELATIONSHIP		DAYTIME PHONE (+ AREA CODE) ()	EVENING PHONE (+ AREA CODE) ()
HOW LONG HAVE YOU BEEN A RESIDENT OF FORT MCMURRAY? <input type="checkbox"/> < 1 year <input type="checkbox"/> 1+ years <input type="checkbox"/> Not a resident	DO YOU HOLD A VALID ALBERTA DRIVER'S LICENSE? <input type="checkbox"/> Yes <input type="checkbox"/> No	COUNTRY OF CITIZENSHIP IF YOU ARE NOT A CANADIAN CITIZEN	
		ARE YOU ENTITLED TO WORK IN CANADA? <input type="checkbox"/> Yes <input type="checkbox"/> No	FIRST LANGUAGE SPOKEN

Please PRINT clearly and complete entire form

IF YOU WISH TO DECLARE THAT YOU ARE AN ABORIGINAL PERSON, PLEASE SPECIFY:

Status Indian/First Nations
 Non-Status Indian/First Nations
 Métis
 Inuit

ALBERTA ADVANCED EDUCATION AND TECHNOLOGY IS COLLECTING THIS PERSONAL INFORMATION PURSUANT TO SECTION 33(C) OF THE FOIP ACT AS THE INFORMATION RELATES DIRECTLY TO AND IS NECESSARY TO MEET ITS MANDATE AND RESPONSIBILITIES TO MEASURE SYSTEM EFFECTIVENESS OVER TIME AND DEVELOP POLICIES, PROGRAMS AND SERVICES TO IMPROVE ABORIGINAL LEARNER SUCCESS.

ARE YOU A PERSON WITH A DISABILITY? (Optional) <input type="checkbox"/> Yes <input type="checkbox"/> No	IF YES, PLEASE IDENTIFY HERE
--	------------------------------



Education Record: High School

ARE YOU IN HIGH SCHOOL? <input type="checkbox"/> Yes <input type="checkbox"/> No	LAST GRADE COMPLETED (CIRCLE ONE) 9 10 11 12	LAST YEAR ATTENDED	HS DIPLOMA RECEIVED/EXPECTED? <input type="checkbox"/> Yes <input type="checkbox"/> No
LAST HIGH SCHOOL ATTENDED OR CURRENTLY ATTENDING		CITY	PROVINCE/COUNTRY

Education Record: Post-Secondary

LAST POST-SECONDARY INSTITUTION ATTENDED(ING)		PROVINCE/COUNTRY	LAST YEAR ATTENDED
LEVEL ACHIEVED (CERTIFICATE, DIPLOMA, DEGREE)	PROGRAM/FACULTY	LENGTH OF TIME ATTENDED (YRS.)	

Check List

<input type="checkbox"/> Official High School Transcripts OR <input type="checkbox"/> Official High School Transcripts indicating courses completed and courses in progress <input type="checkbox"/> Post-Secondary Transcripts (if applicable) <input type="checkbox"/> Resume <input type="checkbox"/> Cover Letter <input type="checkbox"/> Three Letters of Reference <input type="checkbox"/> Proof of Residency <input type="checkbox"/> Copy of CSTS & OSSA Certifications <input type="checkbox"/> Completed Differential Aptitude Test (DAT) <input type="checkbox"/> Completed Test of English as a Foreign Language (TOEFL) (if applicable)	<p>TRANSCRIPTS: All applicants are required to provide official transcripts when applying to a program. High School transcripts must be issued directly by Alberta Education or by the appropriate provincial education board. Post-secondary education transcripts (if applicable) must be ordered from the Registrar's Office of the issuing institution and sent directly to the Careers office. All documents submitted for admission purposes become the property of Careers, and will not be released to, nor photocopied for, the applicant or anyone outside the program.</p> <p>TOEFL: English is the primary language of employment in Fort McMurray. English Language Proficiency is sufficient if applicants can present the successful completion of three or more years of full-time education in English, normally including the grade 12 year or higher, in a Canadian school (or an approved school outside of Canada with accepted English proficiency). If an applicant does not present these years of English education, they must achieve an acceptable score on the TOEFL - a minimum of 71 on the iBT exam and with no score below 17.</p>
--	---

Freedom of Information & Protection of Privacy (FOIP) Statement

The personal information you provide on this admission form is being collected in accordance with the Freedom of Information and Protection of Privacy Act of the Province of Alberta. Data collected is used to determine your eligibility for admission to a program, and, if accepted and registered, is used to process your enrolment, monitor academic progress, distribute follow-up program-related information, awards, graduation and alumni contact. Personal data compiled on this form may also be used by Careers or disclosed to third parties for other operational purposes that are consistent with the mission of Careers The Next Generation or as required by the Statistics Act of Canada or by the Alberta government.

Declaration of Applicant

I hereby acknowledge the FOIP statement above, and verify that all information contained on this form is correct to the best of my knowledge and that no relevant information has been withheld. I agree, if admitted to the Coop Program, to comply with all rules and regulations of CAREERS, and use of information with the FOIP legislation. If admitted to a collaborative program, I will abide by the rules and regulations of the collaborating institutions. I also authorize CAREERS The Next Generation to exchange my records with collaborating institutions.

Careers The Next Generation reserves the right to refuse admission or cancel any admission ruling.

APPLICANT'S SIGNATURE	DATE
-----------------------	------

OFFICE USE ONLY
RECEIVED BY
DATE

Notes: Office Use Only: