

WINTER 2017 Dual Credit Application Form A School College Work Initiative (SCWI)



WINTER Online Application Equal Consideration Deadline for all campuses & programs - Friday Nov 4/16. **All course descriptions can be found at stlawrencecollege.ca/dualcredit under "Dual Credits @ SLC" & "OYAP Apprenticeship**

SECTION 1: Applicant Information								
Student's <u>Legal First</u> Name:		Student's Middle Name: Student's <u>Le</u>		ga <u>l Last</u> Name:		Gender:		
								□ Male
								☐ Female
Phone Numbers:			Date of Birth			T		Age at Dec. 31, 2015:
Home:			Month:	D	Day: Year:			
Cell:								
Mailing Address								
Civic#/Street #:				Apartment, Unit			, Unit oi	PO BOX:
City:	City:			Pi	rovince	Postal Code:		Country (if not Canada)
E-mail Address (students will be sent the	-	lectronica	ılly):					
Student/School Inform	mation:						ı	
Secondary School Name:				School Board: Ontar ALCDSB CDSBEO DLDSB UCDSB			Ontari	io Education # (OEN):
Are you currently working towards a 'Specialist High Skills Major' (SHSM)? Yes □ / No □								
If yes, which SHSM Sector?								
Are you the first in your family (Mother, Father) to attend a post-secondary institution? \square Yes $/$ \square No								
Are you a Crown Ward? □ Yes / □ No								
Aboriginal status: ☐ NONE ☐ Inuit (Check only one) ☐ Non-Status First Nation ☐ Status Fi			□ Inuit □ Status First	Natio	☐ Metis n ☐ Other			
SECTION 2: For Completion by Guidance								
Student's current grade level:				Current # of high school credits:				
Has the student been identified as exceptional through the IPRC? (Identification, Placement, Review, Committee) ☐ Yes / ☐ No			ugh the	Does the student have a current IEP? (Individual Education Plan) □ Yes / □ No				
Has the student previously dropped out and returned to secondary school? $\ \square$ Yes $\ /$ $\ \square$ No								
Does the student belong to the target group as per 'Selection Criteria For Admission to Dual Credit Programs'?								

(see Application Form Checklist for Guidance – THIS IS FOR DATA PURPOSES ONLY) \square Yes / \square No

Student, please explain why you would like to take a Dual Credit course at St. Lawrence College. (eg. post-secondary /career pathway, personal interest, credit, experience college) SECTION 4: Please check **☑** your selected program CONGREGATED PROGRAMS (College classes which are made up of Dual Credit Students only) College Code Program Name Dual Credit Code Campus Duration School Boards Feb. - May ☐ Addictions (B) Brockville All area boards GENE 53 PPA4T 3h/wk, 15wks ☐ Personal Support Worker Feb. - May PSWO 1000 HIC4T Brockville All area boads 3h/wk, 15wks ☐ Taste of the Trades (C) UCDSB &₹ May - June Cornwall SHOP 1 TAP4T Automotive Service Technician 6h/wk, 6 wks **CDSBEO** Welding/ General Carpenter Feb. - May ☐ Addictions (K) PPA4T Kingston All area boards GENE 53 3h/week 15 weeks CARP 159/ Feb. - May ☐ Carpentry Skills (K) Kingston All area boards TDD4T 3h/wk, 15wks CARP 105 Feb. – May Kingston All area boards ☐ Communications (K) COMM 34 EBH4T 3h/wk, 15wks ☐ College and Career Feb. - Mav **GENE 114** IEE4T Kingston All area boards 3h/wk, 15wks Success (K) INTEGRATED PROGRAMS (Secondary students are integrated into regular college classes) College Code **School Boards** Program Name Dual Credit Code Campus Duration Please see Integrated Dual Credit course ☐ Integrated Dual Credits ☐ Brockville choices available in your guidance office or Jan. - April (Please indicate course selections All area boards □ Cornwall online at: below) ☐ Kingston www.stlawrencecollege.ca/dualcredit INTEGRATED DUAL CREDITS Course Selection - All Campuses: 1st Choice | College Course Code: _____ Course Name: _____ 2nd Choice | College Course Code: _____ Course Name: ___

St. Lawrence College Dual Credit WINTER Application Form, 2016-2017

SECTION 3

St. Lawrence College Dual Credit WINTER Application Form, 2016-2017 OYAP INTEGRATED & CONGREGATED LEVEL 1 APPRENTICESHIP PROGRAMS					
Participant Eligibility					
Student must be:					
🗖 a full-time student in Grade 12	or year 5;				
currently working towards the completion of their Ontario Secondary Graduation Diploma (OSSD) and requires additional credit(s) to graduate or has earned their OSSD and returned to high school to prepare for working in the Skilled Trades and Apprenticeship training;					
☐ interviewed by their Board OYAP Coordinator prior to the application being submitted;					
☐ registered with MAESD in the Ontario Youth Apprenticeship Program ,OYAP (Form 1);					
□ signed with a Registered Training Agreement with MAESD, (Form 2).					
Program Name College Code Dual Credit Code Campus Duration School Boards					
☐ Brick & Stone Mason	12 College Credits (See program Overview)	TSZ4Y	Kingston	Feb April (daily, 8 wks)	All area boards

LIMESTONE DSB FOCUS/DUAL CREDIT PROGRAMS					
Program Name	College Code	Dual Credit Code	Campus	Duration	School Board
☐ SWAC – School Within A College	Various	Various	Kingston	Feb June	All schools in LDSB
☐ Team Taught English @ Granite Ridge E.C.	COMM 34	EBH4T	Kingston	Feb-June	All schools in LDSB

C.	CATHOLIC DISTRICT SCHOOL BOARD OF EASTERN ONTARIO					
Program Name		College Code	Dual Credit Code	Campus	Duration	School Board
	Team Taught Carpentry @ St.Matthew's H.S.	CARP 107a	TCJ4C/TCJ3C	Cornwall	Feb June	CDSBEO
	Team Taught Carpentry @ St. Luke's H.S.	CARP 107a	TCJ4C/TCJ3C	Cornwall	FebJune	CDSBEO

UPPER CANADA DISTRICT SCHOOL BOARD					
Program Name	College Code	Dual Credit Code	Campus	Duration	School Board
☐ Team Taught Carpentry @ CCVS	CARP 107a	TCJ3C/4C	CCVS & SLC Cor.	Feb June	UCDSB
☐ Team Taught Hospitality @ GSS	HOTE 21	TFJ3C/4C	GSS & SLC - K	Feb June	UCDSB

SECTION 5: Your Selection Priority
You are permitted to take one Dual Credit per semester. In the event that you have selected more than one Dual Credit, please indicate your I st choice:
Program/Course Name:

Please contact us at $\underline{DualCredit@sl.on.ca}$ if you have any questions.

St. Lawrence College Dual Credit WINTER Application Form, 2016-2017



Dual Credit Program Authorization and Consent Form



dent Name: School Board:					
Program(s) Applied for:					
Signatures are to be affixed in the appropriate space provided b	elow:				
STUDENT CONSENT: Personal information submitted in this application is collected in accordance with the Freedom of Information and Protection of Privacy Act (FIPPA) and will be used for the application, admission and registration process. Information will be shared with the Ministry of Training, Colleges and Universities and Ministry of Education and may be shared with individuals, organizations and institutions approved by SLC for program monitoring, research, marketing or funding purposes. I am aware that upon admission to the Dual Credit program, basic student information will be permanently retained by the College (name, address, gender, course, and status in Canada), in an electronic format. Further information regarding the Collection and Use of Personal Information and the Disclosure of Personal Information to Third Parties can be found in St. Lawrence College's Academic Policy document at the following website: http://www.stlawrencecollege.ca/index.aspx?iPageID=17&iMenuID=2&iCurrID=43					
I give consent to St. Lawrence College, my home school, Lawrence College's SCWI/PASS Office and the School Boo	and my school board to release my application and academic information to St.				
I am aware that if I have an Individual Education Plan (IE SLC's Counselling and Access Ability Services to determin	P), this information will be shared by the school board's Dual Credit Teacher with ne appropriate accommodations.				
I authorize SLC and the Ministry of Education to photograph and/or videotape me, and to publish or broadcast such photograph(s) or video(s) of me through various media. I understand and agree that SLC is not responsible for the misuse or alteration of any such photograph/video by third parties. I hereby release SLC and any of its officers, agents, employees or servants from any and all actions, claims, loss or causes of action from the misuse of such images. To be signed by the student participating:					
Student's Signature					
To be signed by a parent or legally appointed gua	ardian of individuals under eighteen (18) years of age:				
Signature	Date				
Print Name Student is 18 years or older					
I am aware that upon admission to the Dual Credit program, basic student information will be permanently retained by the College (name, address, gender, course, and status in Canada), in an electronic format.					
To be signed by Secondary School Guidance Cou	nsellor:				
Name (Please Print)					
Signature I can verify that the information provided in this applica	Date stion is correct and complete.				