

YOUTH WORK IN TRADES IS PAID WORK-BASED TRAINING

STUDENT ELIGIBILITY	• 14 years of age and not over 19 years of age • In good standing within the school • Registered student within the school district
AGREEMENT (CONTRACT)	• Between the student, parents/legal guardian, School District No. 57, employer, and Skilled Trades BC
COMPLETION	• Upon successful graduation
WITHDRAWAL	• Student leaves or is withdrawn from School • Employer/parent/school/student requests termination
BRIDGING AFTER GRADUATION	Due to seniority, the company may not be able to continue the apprenticeship after High School Graduation.
SCHOLARSHIP ELIGIBILITY	• Been registered in a school district Secondary School Apprenticeship Program prior to graduation • Graduated with a Grade 12 Dogwood Diploma or Adult Dogwood • Successfully completed Youth Work in Trades MWRK1A, MWRK1B, MWRK2A, and MWRK2B • Maintained a C+ average or better on Grade 12 numbered courses • Continued working or training full-time in the trade 5 months after secondary school graduation or have 900 hours reported to ITA.
STUDENT RESPONSIBILITIES	During Youth Work in Trades Apprenticeships, students need to understand the responsibilities of the Agreement and take ownership of their commitments.
FACILITATOR RESPONSIBILITIES	• Ensures that there is a qualified employer willing to train a student. • That the placement provides safe and meaningful training. • Assist Youth Work in Trades students in making sure forms and documents are processed.

In signing this School District No. 57 Youth Work in Trades Apprenticeship application, I certify that I have read the information and in accordance with the Freedom of Information and Protection of Privacy Act (FOIPOP), I give Skilled Trades BC, Ministry of Education, School District No. 57, and the employer, consent to allow the sharing of student information between them as well as consent to allow images for promotional purposes.

NOTE: All forms (Skilled Trades BC Registration Form and this form) must be filled out, including signatures from student, sponsor (employer, and parent/guardian before application will be processed.

NOTE: All applicable sections must be filled out completely including signatures from student, sponsor, employer and parent/guardian before the application will be processed.

Date

SECTION A:

Student name (Please print)

Student signature

Street Address

City

Postal Code

Phone Number

Date of Birth

Provincial Education Number (PEN)

Student SIN# ____ - ____ - ____

SECTION B: (For Distance Education ONLY)

Name of School

This verifies that the School of Record:

- Is responsible for the graduation plan for this student, of which the courses on this application form a part.
- Verifies that this student is NOT currently taking this course at your school.

Signature of Principal/Designate

SECTION C:

Parent/Guardian name (Please print)

Signature of Parent/Guardian

Business name (please print)

Sponsor Name (Please Print)

Apprenticeship Coordinator SD No.57

Sponsor Signature

YOUTH APPRENTICE AND SPONSOR REGISTRATION FORM

Please complete the relevant portions of this form and print clearly. Return completed and signed registration form to the school district/board authority contact. Provide both the student and the sponsor signed copies of the registration form and file the original in the student's permanent records for audit purposes.

* Bold Fields are Mandatory

A. APPRENTICE INFORMATION

Please indicate if this is a ☐ New Registration ☐ Update of a previous Registration		SkilledTradesBC Individual ID #: (leave blank for new registration)
*Legal First Name:	Legal Middle Name (s):	*Legal Last Name:
*Date of Birth (MM/DD/YYYY):	*Gender: ☐ Man ☐ Woman ☐ Non-Binary ☐ Prefer not to answer	PEN:
Suite Number:	*Mailing Address:	
*City:	*Province:	*Postal Code:
*Phone Number: ()	Secondary Phone Number: ()	*Email Address:
Do you agree to receive text message (SMS) notifications on your primary phone number?		☐ Yes ☐ No
*High School Graduation Date (MM/DD/YYYY):	*Name of School:	*Have you participated in a Youth Discover the Trades event? ☐ Yes ☐ No
Do you identify yourself as an Indigenous person? ☐ Yes ☐ No		

*All communication from SkilledTradesBC will be sent to the e-mail address provided.

B. SPONSOR/EMPLOYER INFORMATION

*Name of Sponsor Organization:	SkilledTradesBC Sponsor ID #: (if already registered)	*Supervising Tradesperson Contact Name (First & Last):
*Contact Person:	*Date of Birth (MM/DD/YYYY):	*Certificate # or Sign-Off Authority #:
Suite Number:	*Mailing Address:	
*City:	*Province:	*Postal Code:
Phone Number and Extension: ()		*E-mail:

YOUTH WORK IN TRADES

*Trade Name:	School District/Independent School Authority:
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YOUTH APPRENTICE AND SPONSOR REGISTRATION FORM

Apprentice Responsibilities, Declaration, Authorization And Consent

(If you do not sign and date this section, your application cannot be accepted and will be returned to you.)

C. AGREEMENT TO FULFILL RESPONSIBILITIES OF APPRENTICE

I understand and agree that it is my responsibility to:

- Complete the required work-based training and practical experience under the direction of a qualified individual as assigned by the Sponsor;
- Self-manage the Technical Training component of my apprenticeship in consultation with my sponsor by:
 - scheduling and registering myself into and successfully completing required Technical Training at a SkilledTradesBC-approved training institution of my own choice, OR
 - successfully challenging the required Technical Training or Level where a challenge assessment exists;
- Meet any additional requirements of the Industry Training Program as outlined in the Industry Training Program Profile.

D. ACCURACY OF INFORMATION PROVIDED

I declare that:

all information I have provided or will provide to SkilledTradesBC in the future is true and complete.

I agree to:

immediately notify SkilledTradesBC regarding any future changes to information I have provided.

I acknowledge that:

if I provide untrue information or false documents to SkilledTradesBC, or fail to provide information or documents requested by them:

- I may be denied assessment,
- credit I have received toward my apprenticeship program or certification may be cancelled,
- my registration may be cancelled, and I may not be allowed to re-register,
- my trade certificate issued by SkilledTradesBC may be cancelled, and/or
- I may be subject to criminal prosecution.

E. AUTHORIZATION TO COLLECT INFORMATION INSIDE OR OUTSIDE OF CANADA

I agree that SkilledTradesBC may:

- request information, documents and/or records regarding my education, training, work experience and certification related to my apprenticeship program from:
 - my current and former employers
 - other government bodies or organizations that issue qualifications relating to my skills and knowledge
- contact other governments (including departments, boards and agencies), educational institutions I have attended, and current and former employers inside or outside of Canada to verify my certification, education, training and work experience; and

And I agree to this information being given to SkilledTradesBC.

F. CONSENT TO DISCLOSE INFORMATION

I agree to allow SkilledTradesBC, in accordance with the *BC Freedom of Information and Protection of Privacy Act* to use and provide to others personal information I have provided on my apprentice registration form, as well as any other information necessary for administering the apprenticeship training program in which I am registered and to provide my personal information to other agencies, regulatory authorities and ministries of municipal, provincial and federal governments where the information is necessary for them to fulfill their legal responsibilities and/or manage apprenticeship-related programs.

I also agree to information from my apprenticeship record with SkilledTradesBC being provided to others as follows:

YOUTH APPRENTICE AND SPONSOR REGISTRATION FORM

- To officials in other Canadian provinces/territories: Disclosure of any information collected on my apprentice registration form; verification of my certification, education, training and work experience; results of my assessments / examinations; and status of my application and apprenticeship to determine my eligibility for trade certification programs;
- To my sponsor: Disclosure of my examination/assessment results and other information regarding my apprenticeship program which SkilledTradesBC believes is necessary for meeting the responsibilities of a sponsor.
- To an approved training provider where I am currently applying or registered for apprenticeship training: Disclosure of the records of my previous apprenticeship technical training or other related information necessary for delivery and administration of the training program.
- To agencies and ministries of the provincial and federal governments: Disclosure of information required for determining my eligibility for financial assistance (including but not limited to federal or provincial tax credits, tool allowances, employment insurance or supplementary or enhanced apprenticeship benefits, federal or provincial incentive or completion grants, or scholarships).
- To government organizations or private service providers: Disclosure of information required for purposes of verifying my prior education, training, work experience and qualifications.

G. OPTION TO RECEIVE SOME COURSE NOTIFICATIONS (THIS SECTION MUST BE COMPLETED BY APPRENTICE)

Apprentices are personally responsible for seeking, organizing, and registering themselves in training with SkilledTradesBC-approved institutions. You may find it helpful to receive some notifications directly from approved trainers contracted by SkilledTradesBC of available courses that lead to certification in your training program. Notifications are NOT sent for all courses.

Select appropriate statement:

- ☐ SkilledTradesBC may provide my contact information to SkilledTradesBC-approved public and private training institutions responsible for the trade in which I am apprenticing so they may notify me of scheduled training courses that lead to certification in my current apprenticeship training program. I understand notification may not be sent for all courses.
- ☐ SkilledTradesBC may NOT provide my contact information to SkilledTradesBC-approved public and private training institutions responsible for the trade in which I am apprenticing so they may notify me of scheduled training courses that lead to certification in my current apprenticeship training program.

NOTE TO APPRENTICE:

If you have a question or concern about SkilledTradesBC's use of your personal information, contact a SkilledTradesBC Customer Service Representative. From within Vancouver call: 778-328-8700; From outside Vancouver call toll free: 1-866-660-6011

H. APPRENTICE SIGNATURE

"By my signature below, I signify that I have read, understand and agree to sections C through G of this registration form."

Apprentice's Signature:	Date (MM/DD/YYYY):

YOUTH APPRENTICE AND SPONSOR REGISTRATION FORM

Sponsor Responsibilities and Declaration

I. AGREEMENT TO FULFILL RESPONSIBILITIES OF SPONSOR

I understand and agree that it is my responsibility to:

- Ensure the Apprentice receives training and related practical experience under the direction of a qualified individual (certified Tradesperson or other(s) specified in the Industry Training Program Profile, OR holder of a SkilledTradesBC-issued letter authorizing supervision and sign-off of apprentices in the trade), in a work environment conducive to learning the tasks, activities and functions that form the Industry Training Program in which the Apprentice is registered;
- Enable the Apprentice to regularly attend Technical Training that is required under the Apprentice's Industry Training Program;
- Submit all forms and documents required by SkilledTradesBC to verify completion of the established standards for the Industry Training Program;
- Recommend the Apprentice for certification when the Apprentice has met the established standards for that program and in the view of the sponsor and qualified individual is performing at the level of a Certified Tradesperson in the trade.

J. ACCURACY AND CURRENCY OF INFORMATION PROVIDED

I declare that:

- the apprentice's work-based training will be performed under the direction of a qualified individual as defined in section I. above; and
- all information I have provided or will provide in the future to SkilledTradesBC is true and complete.

I agree to:

immediately notify SkilledTradesBC regarding any future changes to information I have provided.

I acknowledge that:

if I knowingly provide untrue information or false documents to SkilledTradesBC regarding my apprentice, or fail to provide information or documents requested by them:

- my apprentice may be denied assessment,
- credit my apprentice has received toward completion of the apprenticeship program or certification may be cancelled,
- my apprentice's registration may be cancelled, and the apprentice may be prevented from re-registering,
- a trade certificate issued by SkilledTradesBC to my apprentice based on the said information I provided may be cancelled, and/or
- I may be subject to criminal prosecution.

K. SPONSOR SIGNATURE

"By my signature below, I signify that I have read, understand and agree to sections I through J of this registration form."

Sponsor's Signature:	Date (MM/DD/YYYY):
Parent/Guardian's Signature:	Date (MM/DD/YYYY):
SD/BA Contact's Signature:	Date (MM/DD/YYYY):