

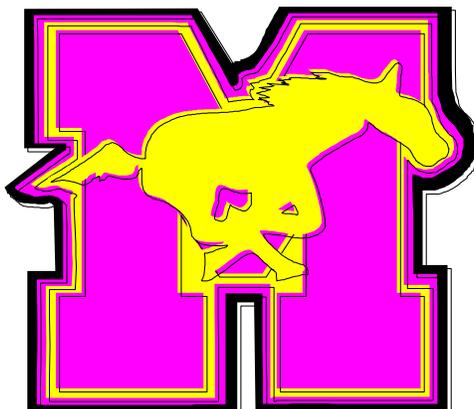
# CO-OPERATIVE EDUCATION 2015/2016

## ENTRANCE CHECKLIST

Welcome to Co-operative Education. If you have received this form you have chosen to take a co-op course next year or have it down as an alternative. Before the course starts a few things have to happen. Please use the following as a checklist to ensure you meet all requirements for the program. Late questionnaires or forms will jeopardize your co-op placement. First consideration will be given to students who have all material in on time.

- 1) Complete the Co-operative Education Questionnaire and hand it into Mr. Gaffney in person. Do not drop it off anywhere.
- 2) Complete the *Renfrew County Board of Education Student Application for Work Education Programs*. This must be signed by your parents and should be handed in with your questionnaire.
- 3) Read and complete *Mackenzie Community School Co-operative Education Statement of Understanding*. This must be signed by your parents and should be handed in with the questionnaire.
- 4) Ensure that you have a S.I.N. Number. If you do not, apply for one **now**. This is done by contacting a Canada Employment Centre.
- 5) See Mr. Gaffney if you have any questions or concerns about the program.

**All forms must be handed in to Mr. Gaffney.**



**WHY CO-OPERATIVE EDUCATION?**

Write a paragraph describing WHY you want to take co-op and WHAT YOU HOPE TO LEARN THROUGH CO-OP.

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**FUTURE CAREER PLANS**

Write a paragraph describing YOUR FUTURE CAREER PLANS (college, university, or work)

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**SPECIFIC PLACEMENT (optional)**

If you have a specific job or placement that you would be interested in, list here. Please also give any contact names that may make it easier for me to get this placement for you.

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**REFERENCES**

State the name of two teachers who will act as references for you.

- 1. Teacher's name: \_\_\_\_\_ Signature: \_\_\_\_\_
- 2. Teacher's name: \_\_\_\_\_ Signature: \_\_\_\_\_

**NOTE: This application must be handed in person to the co-op teacher. Do not drop it off anywhere.**

This is an application for a work experience (a job), therefore this application should be treated as you would treat any job application. If you wish to gain entry into the co-operative education program, the application must be filled in completely, neat, unfolded, unwrinkled, mistake-free, and scribble-free. You will be asked to rewrite the application if it is not submitted in perfect condition.



MACKENZIE COMMUNITY SCHOOL  
**CO-OPERATIVE EDUCATION**  
Statement of Understanding

**HEALTH INFORMATION**

The co-operative education student and his/her parents/guardians should be aware that there are certain risks in the workplace. Pre-placement health and safety training is part of the in-school program. Arranging and paying for inoculations/tests is the responsibility of the individual student. A student who fails to meet the mandatory health requirements will not be allowed to participate in his/her chosen placement.

**Immunization must begin well in advance of beginning placement.**

Certain communicable diseases such as Hepatitis B Virus (HBV), AIDS, Influenza and Tuberculosis may be contracted from humans. Rabies is a viral disease which may be contracted from rabid animals.

**Hepatitis B** vaccine consists of three (3) injections given over a period of six months and full immunity is not attained until all are received. Immunization programs are now sometimes available through schools. Hepatitis B immunization is **highly recommended** for ambulance, dental and health care placements. It is also recommended for daycare placements.

**Tuberculosis testing** (a two step skin test) is recommended for daycare facilities, schools, and health care facilities.

Students should be up-to-date with measles, tetanus and diphtheria.

There is no immunization for **AIDS**. This is caused by a virus called HIV (Human Immunodeficiency Virus) which attacks the body's natural defences against illness. Once infected, the person has the virus for life. HIV is spread through sexual exposure and exposure to blood or tissues, but not through casual contact in the workplace. **Students in all placements must be aware that precautions must be taken in respect to exposure to blood and bodily fluids.**

**Needle-stick injuries: any sharp and needle-stick injuries should be assessed by a physician and referred to the Health Department for additional counselling and follow-up.**

Workers in occupations such as health care, medical labs, ambulance, police, dental offices, or funeral homes must follow standard guidelines of the placement, when dealing with all blood products and body fluids. When giving assistance to anyone, whether or not s/he is infected with HIV, avoid contact with blood. It is essential to protect the skin with gloves or a cloth barrier, to clean any blood-stained surfaces and to wash the hands with soap and water.

**Influenza** inoculation is **recommended** for students working in health care or homes for the elderly. Students working with the elderly should not attend placement while experiencing flu-like symptoms.

**Rabies** is a viral disease which attacks the nervous system and is fatal to humans. For this reason, the NACI (National Advisory Committee of Immunization) recommends that any person at high risk of contact with rabid animals receive pre-exposure immunization. This consists of three (3) shots of Rabies vaccine over three (3) weeks. Occupations in which animal handling or contact is likely include veterinarians, pet store and kennel operators, taxidermists, laboratory staff, naturalists, zoo keepers, police and outdoor educators. Please consult your physician if you require more information.

**Note: At the present time, none of the co-op placements being used by Mackenzie Community School have made any of these inoculations/tests mandatory. This information is being presented to the students and parents so that you can make informed decisions on what is best for your son/daughter.**

## **SECURITY CHECKS**

Students applying for placements with the police, security, daycare or Children's Aid, etc., may require police screening prior to acceptance. Some other institutions may require that students be bonded.

## **SAFETY EQUIPMENT / UNIFORMS / DRESS**

The student must comply with all safety standards of the workplace including the wearing of protective clothing/equipment. Students are responsible for the purchase of any clothing/equipment not supplied by the workplace.

Students working in health care are required to rent a lab coat (supplied by board/school) and to dress in the specified manner for work.

Students in all placements must comply with dress standards of the workplace.

## **INSURANCE**

Students in all placements except as Teachers' Assistants in public schools must be covered by Workplace Safety and Insurance Board. This is paid by the Ministry of Education when the student is not paid for work in the placement. When the student is paid, the employer is responsible for the cost of Worker's Compensation coverage. The Work Education Agreement must be signed by all parties involved **before** the student begins work at the placement.

Students placed in public educational facilities are covered under the board's school accident insurance (OSBIE).

In addition, the student should have Ontario Health Plan coverage.

## **Reporting Accidents in the Workplace**

In the event of any accidents involving the co-operative education student in the workplace, the student must report the accident immediately to the **workplace supervisor** and to the **monitoring teacher**. Where medical attention is required, the teacher will complete the accident report.

## **TRANSPORTATION**

The Boards of Education recommend that where possible, the co-operative education student use public transportation to and from the placement. If the student chooses to drive to the placement, s/he must be covered by the vehicle owner's insurance. The Boards of Education do not accept responsibility.

If driving a company vehicle is part of the student's responsibility in the placement, as outlined on the student's learning plan, the student must have the appropriate classification of driver's license, and be covered by the placement's insurance. The student **should not** drive a personally owned vehicle for the placement.

**Mackenzie Community School**  
**CO-OPERATIVE EDUCATION**  
Statement of Understanding

**I understand that I** will be interviewed by the Co-operative Education teacher and placement supervisor(s) to be accepted for the placement.

**I understand that** the Co-operative Education Program requires me to spend considerable time working in the community as a Co-op student, and as such I will represent the school in a favourable manner.

**I understand that I** must conform to all rules of the program with respect to the following:

- attend regularly and punctually both in school and on the job until the end of the placement as scheduled
- report all absences promptly to supervisor and school at beginning of each work day and provide reason for the absence
- make up any hours missed in the placement
- complete all required assignments both in school and on the job
- abide by the rules of my placement
- work the required hours of the job following company hours
- communicate in a positive manner with my Co-op teacher, supervisor and fellow students
- work co-operatively with colleagues in school and on the job
- maintain strict confidentiality regarding workplace matters
- maintain professional working relationships with co-workers

**I understand that** the job that I will be performing as part of my Co-op placement is related to in-school credits.

**I understand that I** should not expect to be paid for my work term.

**I understand that** the Co-op placement will take priority over part-time employment and that any adjustment to working hours must be co-operatively arranged with the Co-op teacher and Co-op supervisor.

**I understand that I** am responsible for transportation to and from the worksite, that it is the recommendation of the school that I use public transit and that if I choose to drive a vehicle to work, I will be covered by my own insurance.

**I understand that I** am responsible for all related school and work expenses.

**I understand that I** must declare to the Co-op teacher any medical condition which may affect my Co-op placement. **I understand that I** may be required to have a medical examination, provide medical information for placement purposes.

**I understand that** immunization is required/recommended for many work placements. I have read the health and safety information attached and understand precautions are necessary and immunization is advised. **I understand that I** am responsible for this at my own expense.

**I understand that** some placements require a security check, character check, credit check, or other pre-placement screening.

**I understand that** certain placements may require additional specialized application forms and subsequent interviews prior to acceptance of a student.

**I understand that I** may have to wear prescribed clothing for my placement (e.g. safety equipment, business attire depending upon the placement and job description).

**I understand that I** must have the Work Education Agreement (Workplace Safety and Insurance Board) signed by all parties **before beginning work at the placement.**

**I understand that I** must observe all health and safety regulations on-the-job and contact school the same day in case of accident.

**I understand that I** should be covered by the Ontario Health Plan through family coverage.

**I understand that** my Co-op teacher needs to provide pertinent information about me to a prospective supervisor for placement purposes.

**I understand that I** must provide truthful information to my Co-op teacher and supervisor upon request, and that failure to do so may be grounds for termination of my Co-op placement and/or removal from the Co-op program with loss of credits.

**I understand that** theft or vandalism are grounds for termination of my Co-op placement and/or removal from the Co-op program with loss of credits and possible further action under the law.

**I understand that I** must provide my Co-op teacher with updated information should there be any change in the data provided on my application form while I am enrolled in Co-op (e.g. change of address, phone, emergency contact information, medical information, etc.).

**I understand that** I can be removed from the Co-op Program with loss of credits if I am unable to meet program requirements either in school or on the job.

I have read the Co-operative Education *Statement of Understanding* and agree to its terms as indicated by my signature below.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**I understand that** my daughter/son is enrolling in a Co-operative education program which will involve substantial time in the community. I am aware that immunization/tests/precautions are advised/mandatory for certain placements as outlined in the attached pages. **I understand that** my daughter/son must adhere to the standards outlined in the Co-operative Education Statement of Understanding.

\_\_\_\_\_  
Parent/Guardian Signature

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Date