### Unit 1 B

- 1. Please read the course outline located on the website.
- 2. Please have you and your parents sign the following forms:
  - Work Experience -that acknowledges the course outline
  - Travel and Activity Form-allows you to travel unsupervised
- 3. Fill out the **Work Experience Application Form** and the **Windsor Work Experience Placement Request** form.
  - Under the Work Experience Placement Requests you need to take some time and review the possible jobs you can do

This is the most important part of your journey as the placement requests you put down will be the ones we work with to find you your job.

4. Are you working? Please download a **TRAINING PLAN** from the website.

Hand this assignment in with your Unit 1A Assignment

#### **WORK EXPERIENCE**

After reviewing the course outline either brought home or found at: <a href="http://sianoliver.weebly.com/work-experience">http://sianoliver.weebly.com/work-experience</a>

We are acknowledging the following:

#### **STUDENT:**

Student Name:

I understand that to complete the course requirements I must

- Complete all course work assigned before and after the Work Experience Placement
- Complete 90-100 hours of work experience related to my career goals
- Agree to attend all classes and fulfill my job placement requirements in order to pass this course.

Stadent I tame.	
Student Signature:	Date:
PARENT:	
I have read the course outline and underso placement requirements in order to pass t	tand my son/daughter must fulfill the course job his course.
Parent Signature:	Date:



#### Windsor

931 Broadview Drive North Vancouver, BC V7H2E9 Phone: 604-903-3700 Fax: 604-903-3701



#### WORK EXPERIENCE TRAVEL & ACTIVITY APPROVAL FORM

For unsupervised travel to and from and attendance at: Interviews, field trips, career fairs and seminars

Student Name:  Grade:	School Contact: Phone:	ntact Information: Sian Oliver 604-903-3700 Ex 809909	
Work Experience Activity:			
Interviews or Seminars or Workshops or Field Trips or C	Career Fairs or Open H	ouses	
Supervisor(s): Sian Oliver Start Date: September 01, 2023	End Date: June 30, 2024		
I approve the travel to the activities above, under of the student, and the safety is the responsibility be in attendance or travelling with the student.			
Signatures:			
Student:	Date:		
Parent/Guardian:	Date:		
Principal/Teacher:	_Position/Title: Teache	r	

## Work Experience Application \*\*\*PLEASE PRINT VERY CLEARLY\*\*\*--

Stu	dent Name:				_
Stu	dent Email:				
Cell	I Phone number:				
Birthdate:		Grade:			
Par	ent/Guardian Contact Informa	ation:			
Par	ent/Guardian Contact Name:			_	
Hon	Home phone;Cell:				
Wor	rk phone:				
Pare	ent/Guardian email:				
Aı	rea of Interest:				
	Business and Applied Business				
	Fine Arts, Design and Media				
	Fitness and Recreation				
	Health and Human Services				
	Liberal Arts and Humanities				
	Science and Applied Science				
	Tourism, Hospitality and Foods				
	Trades and Technology				

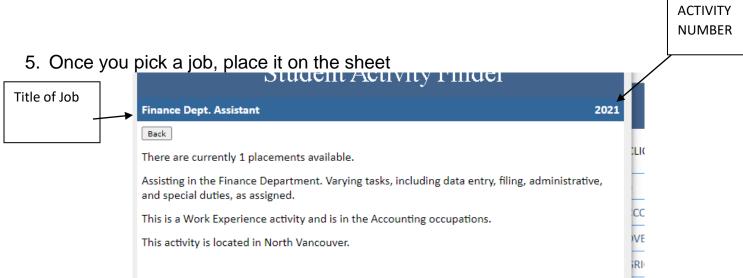
#### **Work Experience Placement Request Form**

In order to place you, or get experience in a job you may be interested in, please go through our Student Activity Finder to identify work experience jobs available on our data base.

- 1. Go to the Windsor Work Experience Blog
- 2. Scroll down the blog to 'POPLUAR LINKS'



- 3. Click the SD44: WEX ACTIVITY FINDER
- 4. Scroll through the lists of jobs and see what is available



6. Make sure you look at least 5 and <u>all</u> information is filled out.

Please fill out at least 5 from most interested to least.

	ACTIVITY NUMBER	TITLE OF JOB	Brief description and how it relates to your interests
#1			
#2			
#3			
#4			
#5			
#6			
#7			

**ARE YOU CURRENTLY WORKING?** 

# COMPANY POSITION LOCATION DATE STARTED