



Student Name: _____ School: _____

Program: _____ Start Mo/Yr: _____/20



CENTRAL OKANAGAN PUBLIC SCHOOLS

DUAL CREDIT APPLICATION

- **CERTIFIED EDUCATION ASSISTANT**
 - **HEALTHCARE ASSISTANT**
 - **EARLY CHILDHOOD EDUCATION**

DUAL CREDIT PROGRAM CHECKLIST

GETTING STARTED

- Students/parents meet with their school Career Coordinator/counsellor to review program options.
- Students should not be taking a post-secondary programs unless they have met the prerequisites and are prepared to attend all classes and complete all course work.
- Careful consideration should be exercised when deciding on enrolling in post-secondary courses. College courses will be permanently recorded on your post-secondary file.
- Withdrawal process: If you are not able to complete the program you may withdraw without academic penalty as per Okanagan College's policy. See <http://www.okanagan.bc.ca/>.

HOW TO APPLY:

- See your school career coordinator/counsellor prior to filling out application.
- Students are to return the completed application package to their school career coordinator/counsellor.
- Students must attend "**Student for a Day**".
- **Please ✓ which program you are applying to below**

✓	For schools only:	
<input type="checkbox"/>	• CEA Applications	• submit to <i>Bob Boback at Hollywood Road</i>
<input type="checkbox"/>	• Health Care Assistant Applications	• submit to <i>Bob Boback at Hollywood Road</i>
<input type="checkbox"/>	• Early Childhood Education Applications	• submit to <i>Bob Boback at Hollywood Road</i>

- A Career Coordinator will contact you to notify you of your acceptance and what the next steps are.
- Students are accepted based on a first come-first serve basis in addition to meeting the prerequisites and the student's readiness for an adult learning program.
- Where the number of applicants exceed availability a waitlist may be created.

Use the checklist below to ensure your application is "complete" before handing into the Career Centre.

- Central Okanagan Public Schools Application**
- Okanagan College application** (2 pages)
- Okanagan College **Consent to Release Information Form**
- Completed and signed **Responsibility Agreement**
- Completed and signed **Transition Plan**
- High school **transcript** (DVR) (*provided by Career Counselling Centre*)
- Teacher Recommendation** Form

NOTES:

- A Criminal Record Check will be distributed in class at the start of the program. Incomplete applications will delay registration.
- Tuition fees only will be paid by SD No. 23. You are responsible for books/supplies and ancillary fees.
- Fees are subject to change.

CENTRAL OKANAGAN PUBLIC SCHOOLS APPLICATION FORM

Please print

Name* _____
Last Name First Name Middle Name

Address* _____ City* _____

Home Phone* _____ Student Cell _____ Postal Code* _____

Date of Birth (mm/dd/yyyy)* _____ SIN* _____

Are you of First Nations Heritage? Yes No Canadian Citizen Yes No

Student email address: (most used)* _____
NOT SD23 SCHOOL EMAIL, NO PARENT EMAIL, (USE GMAIL, HOTMAIL, ICOUD ETC.)

Parent email address:* _____

Parent / Guardian Contact* _____

Home Phone * _____ Work/Cell* _____

Emergency Contact Person _____

Home Phone _____ Work/Cell _____

*Are you currently on an IEP or Learning Plan? No Yes If yes, please specify which one:
 IEP Learning Plan Behaviour Support Plan

I/We certify the information given in this application is true and complete to the best of my knowledge and understand that, if selected for a Dual Credit Program, falsified statements may be reason for removal. I authorize investigation of all statements contained herein and the references listed in this application. I allow the Dual Credit Department to communicate to all Post-Secondary Institutions for educational purposes relating to my selected field of study. I allow the Dual Credit Programs Department to use any work or school related picture of myself for the purpose of promotion and communication of the program.

Parental Note: Some of the content of the program may be adult oriented. By signing this form, you are acknowledging that you are aware that some of the content in the program is mature in its nature and you are granting your child permission to fully participate in all aspects of the program.

Criminal Record Search: Where applicable, applicants must complete an RCMP criminal records check to ensure suitability in working with a vulnerable sector. By signing this form, parents/guardians are agreeing to allow their student to complete the criminal record search at the student's cost, prior to acceptance into the program. Students must submit the CRC on their own – do not return to school.

Student Signature _____ Date _____

Parent/Guardian (print name) _____

Parent/Guardian Signature _____ Date _____

All signatures must be in place before application is accepted.

CONSENT TO RELEASE INFORMATION

contained in student academic records

In order to comply with privacy legislation and College policy, any student who wishes Okanagan College to release their information to a third party must complete and sign this form or fill in the online form in their myOkanagan account.
Note: Many departments have their own release of information forms; for example, Disability Services and Counselling. Please contact them directly for a release form.

STUDENT PROFILE

Legal Last Name: _____ **Legal First Name:** _____

OC Student ID: _____ **Date of Birth (dd/mm/yy):** _____

Add Release (only one person per release)

Name (First and Last): _____ Central Okanagan Public Schools - Career Life Programs _____

Relationship to you:

- | | | |
|---|-----------------------------------|---------------------------------|
| <input type="checkbox"/> Citizenship & Immigration Canada | <input type="checkbox"/> Employer | <input type="checkbox"/> Family |
| <input type="checkbox"/> Friend | <input type="checkbox"/> Lawyer | <input type="checkbox"/> Parent |
| <input checked="" type="checkbox"/> School District | <input type="checkbox"/> Sponsor | <input type="checkbox"/> Spouse |
| <input type="checkbox"/> Other: _____ | | |

Note: Select "All" and enter the effective dates to consent all of the items to be released. Or select specific items and enter the effective dates to consent to the specified items to be released.

Effective Dates (maximum of 2 years): **From:** _____ **To:** _____
(today's date) (two years from today's date)

INFORMATION TO RELEASE

<input checked="" type="checkbox"/> All current information listed below <input type="checkbox"/> Name <input type="checkbox"/> Address <input type="checkbox"/> Phone <input type="checkbox"/> Email	<input type="checkbox"/> Status of application <i>Application decision, outstanding items and deadlines</i> <input type="checkbox"/> Financial information <i>Tuition, fees, fines, invoices/statements/receipts and tax receipts, which all may include your program, name, address and student ID</i> <input type="checkbox"/> Transcript of academic record and confirmation of enrolment <i>Official or unofficial transcript and related information, including grades, academic standing, and current, past, future registrations. Transcripts may include your name, address, and student ID</i> <input type="checkbox"/> Media information <i>All images and sound recordings in any media for any purpose</i> <input type="checkbox"/> Other: _____ _____
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You may rescind or amend this authorization in writing or in your myOkanagan account at any time.

Signature: _____ **Date:** _____

Submit the completed form with an original signature to the Registrar.



TEACHER RECOMMENDATION

A teacher related to the program the student is applying for should complete the Teacher Recommendation. The information on this recommendation will be used to determine candidates for the Central Okanagan Public Schools Dual Credit Programs. A quality response to the general comments section is also important.

Student Name: _____

Teacher: _____ **Class:** _____

School: _____ **Teacher Phone #:** _____

	<i>Excellent</i>	<i>Good</i>	<i>Fair</i>	<i>Needs Improvement</i>
1. Attendance/Punctuality Comments: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Work Ethic Comments: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Attitude Comments: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Mechanical Ability in Field Comments: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Initiative/Motivation Comments: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Interpersonal Skills/Citizenship Comments: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. General Comments: _____				

Teacher Signature: _____

Date: _____

RESPONSIBILITY AGREEMENT

High School/School District/Okanagan College Responsibilities

We will:

- provide Okanagan College tuition funding only for approved programs.
- inform you of the program prerequisites and requirements.
- help you create a transition plan that helps you navigate high school graduation and transition into post-secondary.
- work with Okanagan College admissions to ensure you are enrolled in your program of choice.
- assist you with the identification of student support services as needed (assessment, learning skills, math & English upgrading, disability services, etc.)
- liaise with your parents, high school teachers, and Okanagan College instructors regarding your participation in the program.
- report post-secondary marks for your high school transcript.

STUDENT RESPONSIBILITIES

As a SD No. 23 Dual Credit student I agree to:

- Ensure that I meet with my counsellor and career program coordinator to plan my high school timetable and transition plan to ensure I have all the prerequisites and grad requirements.
- Submit a completed application package to my school's career center and pay any applicable application/requisite fees to Okanagan College.
- Communicate with Okanagan College admissions to ensure all prerequisites and payments are made on time.
- Pay all required fees for student ancillary fees and textbooks/supplies.
- Be prepared to fully commit to the rigors of post-secondary school and agree to match course hours with home study.
- Contact my instructor if I will be late or absent. Daily attendance and punctuality are required at the post-secondary level. Failure to attend daily, and on-time may result in removal from the program without any refund.
- Inform Okanagan College, your parents, and your home school (counsellor and career coordinator) if you withdraw from the program. Remember withdrawing from the program may affect your permanent post-secondary record.
- Follow the Okanagan College General Academic Regulations and Policies regarding student conduct, withdrawal, etc. (<http://webapps-5.okanagan.bc.ca/ok/Calendar/GeneralAcademicRegulationsandPolicies>)
- I will continue to respect the School District No. 23 student code of conduct regardless of program location.

Student Name (print) _____ **Date** _____

Student Signature _____ **High School** _____

Parent/Guardian Name (print) _____ **Parent/Guardian Signature** _____

Career Coordinator Name (print) _____

DUAL CREDIT TRANSITION PLAN

Date: _____

Last Name: _____ First Name: _____

School: Central GESS KSS MBSS OKM RSS
(circle one)

☞ Make an appointment with your Career Coordinator/Counsellor to develop an Education/Transition Plan.

1. Courses selected must meet the current graduation requirements. You may need to modify your timeline to achieve this. *(Students must graduate when they complete their Dual Credit program.)*
2. Attach DVR

REQUIRED COURSES <i>(52 credits)</i>				ELECTIVE COURSES <i>(28 credits)</i>	
Course	Credits	Course	Credits	Students can choose to complete elective courses through a Dual Credit Program. Select one below	
English 10	4	English 11	4	Transition Pathway	
Fine Arts 10	4	Social Studies 11,	4	<input type="checkbox"/> Business	<input type="checkbox"/> Health
Science 10	4	Science 11 or 12	4	<input type="checkbox"/> Technology	<input type="checkbox"/> Science
Math 10	4	Math 11 or 12	4	<input type="checkbox"/> Communications	<input type="checkbox"/> Trades
Social Studies 10	4	English 12	4	<input type="checkbox"/> Other	
PE 10	4	Career Life Connections/GT	4	Specify Pathway:	
Career Life Education/PL	4		4		

Grade 11		Grade 12		POST-SECONDARY
<i>Sem 1</i>	<i>Sem 2</i>	<i>Sem 1</i>	<i>Sem 2</i>	<i>(Transition Program/Course(s))</i>
Total Credits:		Total Credits:		Total Credits:
		Predicted Graduation Date		

Student Signature

Parent/Guardian Signature

Career Coordinator/Counsellor Signature