

## STUDENT APPLICATION

### PERSONAL DATA (Please Print)

Last Name:	First Name:
Address:	Postal Code:
	Telephone:

### OFF-CAMPUS EDUCATION PROGRAM

Please indicate three work site choices that you would prefer.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Do you have a specific place in mind? \_\_\_\_\_

If accepted into the program, what method of transportation will you use to get to your place of employment?

Car                       Public Transportation                       Other

### EMPLOYMENT RECORD

Employer	Type of Work	From	Duration	To
1. _____	_____			
2. _____	_____			
3. _____	_____			

Do you presently have a part-time job?	Are you willing to rearrange part-time job hours to accommodate off-campus education commitments?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

(continued)

Source: Adapted from materials supplied by the Calgary Roman Catholic Separate School District No. 1.

**RELEVANT COURSES**

Please list any courses you have taken that may be relevant to your work site choice.

\_\_\_\_\_

**EXTRACURRICULAR ACTIVITIES**

List any extracurricular activities, volunteer work or outside organizations you are/were involved with.

Dates		Organization	Type of Involvement
From	To		

\_\_\_\_\_

List special skills, courses, certificates, hobbies, interests, etc.:

\_\_\_\_\_

**FUTURE PLANS**

Please check off what your current plan is for after high school.

Work       University       Community College       Apprenticeship

Please describe your long-range career plans.

\_\_\_\_\_

**RATIONALE**

Briefly explain why you are interested in the Off-campus Education program.

\_\_\_\_\_

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

\_\_\_\_\_  
Parent(s) Signature

\_\_\_\_\_  
Date