



Youth WORK In Trades Student Package

Revised: September 2017

If you require further information, please call Lindsay Johnson, Careers & Transitions, at 250-475-4182

What is the 'Youth WORK in Trades' Program?

Background

'Youth WORK in Trades' is an educational program jointly supported by the Ministry of Education and the Industry Training Authority (ITA). The main goal is to allow students to begin apprenticeship training as part of their secondary school education program. Through this program, students are able to register with the ITA as an employer-sponsored apprentice, log work-based training (WBT) hours towards a specific trade certification, and accrue high school credits towards their graduation.

The Youth WORK in Trades program involves students:

- 15 years of age or older, in grades 10, 11, or 12, including students on Adult Graduation Programs
- completing up to 480 hours of work-based training, involving skill development through practical, hands-on experiences
- earning up to 16 course credits: WRK 11A, 11B, 12A & 12B
- becoming apprentices in an ITA-recognized trade. Explore the list of Red Seal and BC Trade programs at
 http://www.itaba.co/discover.opprenticeship.programs/search.programs
 - http://www.itabc.ca/discover-apprenticeship-programs/search-programs
- becoming aware of Foundation and Level 1 Apprenticeship Technical Training programs within their district (ACE IT)

Work-based training hours must be:

- verified by a certified tradesperson or equivalent, under the supervision of an employer sponsor
- paid employment
- reported by sponsors to the ITA and recorded by apprentices and the District Work Transitions Coordinator
- NOTE: In some cases, students can be given credit for up to 240 hours of WBT hours, accrued within one year prior to becoming an apprentice

How to Become Eligible:

- Through family or business contacts, identify an employer who has trades-qualified employees *and* is willing to register you as an apprentice in your desired occupation
- Talk with the Career Coordinators at your school to obtain help finding a potential employer
- Identify a potential employer by participating in a Career Prep, Work Experience or District Career Program in your school

Youth WORK in Trades Awards:

A \$1000 bursary is available to students that participate in this program and achieve sustained and exceptional work as an apprentice. The money is intended to assist the apprentice with the purchase of tools, equipment, materials, or tuition necessary to continue in their trade.

To be eligible for a Youth WORK in Trades award, youth apprentices must have:

- o been registered in a Youth WORK in Trades Program prior to graduation
- o graduated with a Grade 12 Dogwood Diploma or Adult Dogwood
- o successfully completed WRK 11A, WRK 11B, WRK 12A, and WRK 12B
- o maintained a C+ average or better on grade 12 numbered courses
- reported a minimum of at least 900 hours to the ITA by December 31 of the school year the student turns 19

All students are automatically registered for the award, and then selected if the above requirements are satisfied.

Greater Victoria School District #61 Youth WORK in Trades Program <u>CHECK LIST</u>

Each student file should include at least the following:

Pre-Placement:

- □ Student-Teacher-Supervisor Interaction Log (to be completed by teacher)
- □ Application Form (completed)
- □ ITA Youth Apprentice and Sponsor Registration Form (completed)
- $\hfill\square$ WorkSafe BC Employer Clearance Letter
- □ Worksite Inspection Sheet (completed)
- □ WCB "Right to Refuse Unsafe Work" form (completed)
- □ Work & Post-Secondary Transition Plan (completed)

During Placement:

- □ Student-Teacher-Supervisor Interaction Log (updated)
- □ Student Safety Checklist (completed during first visit)
- □ Trade-Specific Training Plans (reviewed during the first week of each 120 hour period)
- □ Student Time Log (updated throughout placement)
- □ Training Plan (updated throughout placement)

Post-Placement:

- □ Student-Teacher-Supervisor Interaction Log (complete)
- □ Trade-Specific Training Plans (completed after each 120 hour period)
- □ Student Time Log (completed after each 120 hour period)
- □ Employer Evaluation (completed after each 120 hour period)
- □ Student Self Evaluation (completed after each 120 hour period)
- \Box Student Resume
- □ Final Assessment (completed after each 120 hour period)

Greater Victoria School District #61 Student-Teacher-Supervisor Interaction Log

This document provides a way for teachers to record interactions between themselves and their student, and between themselves, the employer sponsor, and the certified tradesperson.

Date	Contact	Information

Youth WORK in Trades Application Form

		STU	DEN	T INI	FOR	RMAT	ION	
LEGAL FIRST NAME	N	MIDD			ME .			LEGAL LAST NAME
SCHOOL GRADE				GE	NDER	2	PEN #	
HOME ADDRESS (STR	EET, C	ITY,	PRO	VINC	CE,	POST	AL C	ODE)
HOME PHONE				(CELL PHONE			
EMAIL ADDRESS							BIR	THDATE (MM/DD/YY)
TRADE		Are yo	u regi	stered	d, or	plannii	ıg on re	egistering in the Youth TRAIN in
	-	Trades	s prog					
		NO		YES	•	trade:		
		MDIC		-				
COMPANY:	ועין	WIPLC	JYER			MATI Ervis		
COMPANI:				2	JUP		JOK:	
COMPANY ADDRESS (STREE	Τ, CI	TY , 1	PRO	VIN	CE, P	OSTA	L CODE)
PHONE:	FAX:					ЕМА	IL:	
ITA #:	Supervisor's TWI			WID	D #: WORKSAFE BC #:		KSAFE BC #:	
APPLICANT'S SIGNAT	URE							
I certify that all statement		is appl	licati	on ar	e tru	le and	comp	lete.
SIGNATURE:		1			DATE:			
PARENT'S/GUARDIAN	SIGNA	TUR	E(S)	•				
I grant my son/daughter	permissi	ion to	parti				outh V	VORK in Trades program.
SIGNATURE:]	DATE:				
I grant permission to staff of Greater Victoria Sch footage of my son/daughter for the purposes of p								
SIGNATURE:]	DA'I	`E:			
	PRINCIPAL'S SIGNATURE:							
I certify that this student	is a suit	table c	candi				ath W(ORK in Trades program.
SIGNATURE:			DA'I	r E:				



ITA Customer Service 800 - 8100 Granville Ave Richmond, BC V6Y 3T6 Tel: 778-328-8700 Fax: 778-328-8701 Toll Free: 1-866-660-6011 customerservice@itabc.ca

Please complete the relevant portions of this form and print clearly. Mandatory fields are indicated in **BOLD**. Please return completed and signed registration form to the school district/board authority contact. SSA and ACE IT students must be registered via the Youth online registration system using the information from this SSA/ACE IT registration form. Provide both the student and the sponsor (If SSA) signed copies of the registration form and file the original in the student's permanent records for audit purposes.

Please indicate the purpose of your request:

* Bold Fields are Mandatory

A. Apprentice Information

Please indicate if this is a Image: New Registration Image: Update of a prev	ITA Individual ID #.(leave blank for new registration)			
*Legal First Name:	Legal Middle Name (s)::	*Legal Last Name:	
*Date of Birth (MM/DD/YYYY):	*Gender: 🗖 Male	🗖 Female	PEN:	
Suite Number:	Mailing Address:			
*City:	*Province:		*Postal Code:	
*Phone Number: ()	Secondary Phone Nur ()	nber:	*Email Address:	
*High School Graduation Date (MM/DD/YYYY):	*Name of School:		*Have you participated in a Yes 2 It activity?	
Do you identify yourself as an aboriginal person? ■ Yes ■ No		f yes are you: First Nations 🗖 🛛 N	ı́étis ☐ Inuit □	

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

B. Sponsor/Employer Information

*Name of Sponsor Organization: ITA Sponsor IC registered): *Contact Person:		ITA Sponsor ID # (if already registered):	Supervising Tradesperson Contact Name (SSA only): *First & Last: *Certificate # or Sign-Off Authority #:
			*E-mail:
Suite Number:	*Mailing Address:		
*City:		*Province:	*Postal Code:
Phone Number a ()	nd Extension:	Fax I	Number:)

C. Program Information

Program Type (Select one):	TRAIN Intake (MM/YYYY):	Program Start Date (MM/DD/YYYY):	Program End Date (MM/DD/YYYY):		
Trade Name:					
OUTH WORK IN TRADES					

*Trade Name:	School District

The Industry Training Authority is an agency of the Government of British Columbia. Page 1 of 4 www.itabc.ca Youth Apprentice And Sponsor Registration Form

Oct 2016



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 an ITAapproved 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 the Industry Training Authority ("ITA") in the future is true and complete.

l agree to:

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

I acknowledge that:

if I provide untrue information or false documents to the ITA, 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 the ITA 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 the Industry Training Authority 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 the ITA.

F. Consent to Disclose Information

I agree to allow the ITA, 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.



ITA Customer Service 800- 8100 Granville Ave Richmond, BC V6Y 3T6 Tet: 778-328-8700 Fax: 778-328-8701 Toll Free: 1-866-660-6011 customerservice@itabc.ca

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

- 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 ITA 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 ITAapproved institutions. You may find it helpful to receive some notifications directly from approved trainers contracted by ITA of available courses that lead to certification in your training program. Notifications are NOT sent for all courses.

Select appropriate statement:

- The ITA may provide my contact in formation to ITA-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.
- The ITA may NOT provide my contact information to ITA-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 ITA's use of your personal information, contact an ITA 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):	
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Oct 2016



SPONSOR RESPONSIBILITIES AND DECLARATION

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

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 an ITA-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 the Industry Training Authority 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 the Industry Training Authority is true and complete.

I agree to:

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

I acknowledge that:

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

- my apprentice may be denied assessment, ٠
- credit my apprentice has received toward completion of the apprenticeship program or certification may be ٠ cancelled,
- my apprentice's registration may be cancelled and the apprentice may be prevented from re-registering,
- a trade certificate issued by the ITA 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):

WorkSafe BC Employer Clearance Letter

- 1. Go to the WorkSafe BC site: www.worksafebc.com
- 2. Select **Get a Clearance Letter** under *Insurance* on the home page
- 3. Scroll down and click the yellow box labelled **Get a Clearance Letter** under the heading *Public access to clearance letter*
- 4. In **Step 1: Tell us who is requesting the letter** enter the information in the required fields:
 - a. Legal Name: Greater Victoria School District #61
 - b. WorkSafeBC account number: 037599
 - c. Address, City, Postal Code: Home School Address
 - d. Phone Number: Home School Phone Number
 - e. Email Address: Work Experience Coordinator's Email Address

5. In Step 2: Find firm(s) for the letter

- a. Click the **Search** button
- b. Select Legal Name or Trade Name
- c. Enter the name of the business in the field provided. Click the **Search** button
- d. Scroll down to find out if the Employer's WorkSafe BC record has been found
- e. Click the **Select** box beside the desired business name
- f. Click on the **Done** button
- 6. Click yellow box labelled **Create Clearance Letter** (bottom left hand corner)
- 7. **Review** the clearance letter. The status of the employer must be **'active and in good standing'**. Also stated in bold, is the date in which the business' coverage is guaranteed until till. If this date occurs before the student is finished their work experience, it is recommended that another clearance letter be printed off to ensure proper coverage.
- 8. If the above requirements are satisfied, print a copy and place it in the student's work experience file. If the above requirements are not satisfied, phone the Career Program's office at 250-475-4182.

Greater Victoria School District #61 WORK SITE INSPECTION SHEET

Employer: _____

WorkSafeBC #: _____

Supervisor: _____

SSA Teacher: _____

Date: _____

Teacher Signature: _____

School Career Teacher Contact

In evaluation of a worksite, please bear in mind that the two most important considerations are: 1. the provision of a safe work environment

2. the interest and concern of the site supervisor for the student

PLEASE CHECK THE APPROPRIATE DESCRIPTION:

□ This is a <u>standard worksite</u> (where a worker performs the tasks and responsibilities related to a career under supervision of a worksite employer).

OR

- □ This is a <u>non-standard worksite</u> (a location created by the school district for the purpose of providing work experience, a volunteer position, a post-secondary placement in which the student participates as a student, not an employee).
- □ This is a physically safe worksite (includes location, environmental conditions, building structure, etc.)
- $\hfill\square$ Necessary safety practices are in place and the student will be informed of these.
- □ The employer has been informed of WorkSafe BC accident or injury reporting procedures and coverage.
- $\hfill\square$ The employer/supervisor is familiar with and supports the objectives of the program.
- □ The employer/supervisor will ensure that the student is adequately instructed/trained and supervised.
- □ The employer/supervisor will ensure a comfortable working environment for the student including acceptance of the student as an integral part of the work team, freedom from harassment, reasonable expectations for work, breaks, lunch, etc.
- □ The employer/supervisor is willing to interview the student prior to the work experience (if applicable).
- □ The employer/supervisor is willing to assist in the evaluation of the student, to provide access to teachers on the worksite and to discuss the student's progress with the student and school staff.

Please list any reservations, concerns or limitations you have about this worksite.

Safety attire and/or equipment required:

This worksite is: \Box Recommended

 \Box Not recommended

Occupational Health and Safety Regulation 3.12: The Right to Refuse Unsafe Work

- 1. A person must not carry out or cause to be carried out any work process or operate or cause to be operated any tool, appliance or equipment if that person has reasonable cause to believe that to do so would create an undue hazard to the health and safety of any person.
- 2. A worker who refuses to carry out a work process or operate a tool, appliance or equipment pursuant to subsection (1) must immediately report the circumstances of the unsafe condition to his or her supervisor or employer.
- 3. A supervisor or employer receiving a report made under subsection (2) must immediately investigate the matter and
 - a. ensure that any unsafe condition is remedied without delay, or
 - b. if in his or her opinion the report is not valid, must so inform the person who made the report.
- 4. If the procedure under subsection (3) does not resolve the matter and the worker continues to refuse to carry out the work process or operate the tool, appliance or equipment, the supervisor or employer must investigate the matter in the presence of the worker who made the report and in the presence of
 - a. a worker member of the joint committee,
 - b. a worker who is selected by a trade union representing the worker, or
 - c. if there is no joint committee or the worker is not represented by a trade union, any other reasonably available worker selected by the worker.

If the investigation under subsection (4) does not resolve the matter and the worker continues to refuse to carry out the work process or operate the tool, appliance or equipment, both the supervisor, or the employer, and the worker must immediately notify an officer, who must investigate the matter without undue delay and issue whatever orders are deemed necessary.

Student

Signature:_____ Date:_____

School Coordinator

Signature:	Date:

Work & Post-Secondary Transition Plan

Note:

- 1. Ensure you have included and considered your graduation requirements in your Transition plan.
- 2. Complete the 3 Year Education/Transition plan in full beginning with your Grade 10 courses.
- 3. Timetable changes should be made with the approval of a Counselor or Administrator
- 4. Include any Dual Credit and/or WRK courses in your predicted course count.

Student:		School:	
Trade: Bi		rth Date: 0	frade:
courses) in Grades 10 – 12 for	graduation 80	<u>mum</u> of 80 credits (equivalent to 2 n. Students can choose to complet credits.	
1. Required Courses - 52 cred	lits in cou Credits	rses listed below: Course	Credits
Language Arts 10	4	Language Arts 11	4
Fine Arts or Applied Skills 10, 11, 12	4	Social Studies 11,Civics 11, First Nations 12	4
Science 10	4	Mathematics 11 or 12	4
Mathematics 10	4	Science 11 or 12	4
Physical Education 10	4	Language Arts 12	4
Planning 10	4	* Graduation Transitions 12	4
Social Studies 10	4		
Note: Graduation = Minimu	m 4 Grade	12 level courses + * Graduation Trans	itions 12.
2. Elective Courses – 28 credits Students can choose to complete elective requirements through a Dual Credit transition pathway (PSI Credits) and/or the Youth WORK in Trades Program (WRK 11A, 11B, 12A, 12B)			

Career Pathway: ______ Specific Occupation: _____

Year:		Year:		Year:		Year:
Gr 10 Sem 1	Gr 10 Sem 2	Gr 11 Sem 1	Gr 11 Sem 2	Gr 12 Sem 1	Gr 12 Sem 2	Transition Program/Courses
Total Credit	:s:	Total Credits	:	Total Credi	its:	Total Credits:
Total Predic	ted Credits:		Pre	dicted Gradu	ation Date:	

Student Safety Checklist

Company/Employer:	Date:
Student:	Supervisor:
Student Signature:	Supervisor Signature:

#	Task	YES	NO	N/A
1.	I was given an orientation regarding workplace safety and generic risks of this job.			
2.	Hazards and risks specific to this workplace were identified during this orientation (physical, chemical, biological etc.). They are:			
3.	I have reviewed the emergency procedures (fire, earthquake) with my employer. They are:			
4.	I know the location of the fire extinguisher and fire alarm. Describe location:			
5.	I have been informed of who health and safety committee members are. They are:			
6.	I have been informed of the WHMIS procedures at my worksite. They are:			
7.	I know where the incident report forms are stored. Describe the location			
8.	I have been informed that Personal Protective Equipment IS / IS NOT required. List:			
9.	I have reviewed worksite policies on dealing with robberies and/or shoplifting. (if applicable).			
10.	I have requested that I will be trained on any machinery or equipment prior to use. Possibly:			

Student Safety Checklist continued...

#	Task	YES	NO	N/A
11.	When in doubt about how to do something safely, I will ask before I begin.			
12.	I have been informed that I WILL BE / WILL NOT BE working alone.			
13.	I have been taught proper lifting procedures/ergonomics. (if applicable).			
14.	I have been taught proper techniques for working from heights. (if applicable)			
15.	Have you been made aware of any potential dangers or hazards, such as air quality, noise levels, tripping hazards, etc? They are:			
16.	I have discussed the WorkSafe BC accident or injury procedure.			
17.	I know who I should report workplace hazards / injuries to. They are:			

EMERGENCY INFORMATION

First Aid Attendant:

Outline the procedures at your work site if you are injured:

<u>Step 1</u>:

<u>Step 2</u>:

Step 3: Receive first aid and / or be transported to a doctor or hospital, as required.

Step 4: Report to parents and school immediately.

Step 5: Complete all forms and contact WorkSafe BC within 72 hours of injury.

INSERT

Trade Specific Training Plan

HERE

Note:

Photocopy *five* copies of your trade-specific training plan:
One to give to your employer at the beginning, that they can hold on to and refer to throughout the placement

- Four to be evaluated by your employer after all four WRK courses

Greater Victoria School District #61

Student Time Log

Student: _____

Supervisor: _____

Student Signature: _____

Supervisor Signature: _____

Teacher: _____

Teacher Signature: _____

Date	Location	Duties Performed	Hours
		TOTAL HOURS:	

Greater Victoria School District #61 <u>Employer</u> Evaluation of Student

Student:

Company: _____

Supervisor:

Your constructive criticism enables us to help the students gain maximum benefit from their participation in the Youth WORK in Trades Program.Please complete an evaluation following each 120 hour period of work. Please see p. 19 for a more detailed description of the evaluation criteria.1 - Weak2 - Needs Improvement3 - Good4 - Excellent

Skills		WRF	X 11A			WRF	K 11B			WRF	K 12A			WR	K 12B	
		120 Hours			120 Hours			120 Hours			120 Hours					
	Da	te:			Da	te:			Da	te:			Da	te:		
Fundamental Skills																
Communication (listening, writing, speaking)	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Information Management	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Numeracy	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Think and solve problems	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Personal Management Skills																
Punctuality	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Responsibility	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Shows Initiative	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Adaptability	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Work Safety	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Teamwork Skills																
Respect	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Cooperation	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Courtesy	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Technical Skills																
Use of Tools/Equipment	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Quality of Work	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Efficiency	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
			~.		_		<u> </u>		_		<u> </u>		_		<u> </u>	
	En	nploye	r Signa	ture	En	ipioyer	Signat	ture	Em	ployer	: Signat	ture	Em	ployer	Signat	ture
	Student Signature		Student Signature			ure	Student Signature				Student Signature					

Greater Victoria School District #61 Evaluation Criteria

Fundamental Skills

	Excellent (4)	Good (3)	Needs Improvement (2)	Weak (1)
Communication (listening,	Mature & effective communication	Uses appropriate communication	Struggles to comprehend and/or	Lacks the desire or effort to
writing, speaking)		skills (listening, speaking, writing)	uses inappropriate language	communicate effectively
Information Management	Efficient and demonstrates initiative	Organized and/or follows	Usually orderly and attempts to	Work station is disorganized
		instruction with little explanation	follow instructions	and/or needs repeated
				instructions
Numeracy	Makes estimates and verifies	Able to observe and record data	Struggles to use numbers	Lacks the desire or effort to use
	calculations	using appropriate methods of	effectively	numbers effectively
		technology		
Think and solve problems	Creative in exploring possible	Recognizes most aspects of	Struggles to find solutions to	Unable to identify & assess
_	solution & acts on opportunities to	situations & applies problem	situations and problems	situations or problems
	improve	solving techniques		

Personal Management Skills

	Excellent (4)	Good (3)	Needs Improvement (2)	Weak (1)
Punctuality	Never late for start of day or	Seldom late for start of day or	Often late for start of day or	Too frequently late for continued
	returning from breaks	returning from breaks	returning from breaks	employment
Responsibility	Performs beyond employer	Can be counted on to complete	Accepts responsibility but	Refuses to be accountable for
	expectations	assigned tasks well and on time	struggles to meet timelines	own actions
Shows Initiative	Independent, creative and	Works independently on routine	After instruction does routine	Takes little or no initiative. Has
	resourceful in accomplishing tasks.	tasks & exhibits some	tasks acceptably but needs	to be instructed repeatedly and
	Looks for things to learn to do	resourcefulness to begin next task	prompting	requires urging
Adaptability	Anticipates the need to adjust. Has a	Adjusts readily	Makes necessary adjustments	Has difficulty adapting to new
	positive attitude towards change		after considerable coaxing and	situations
			instruction	
Work Safety	Consistently demonstrates and	Follows work place safety standards	Can identify safety protocol but	Blatant disregard for work place
	encourages work place safety		inconsistent with implementation	safety

Teamwork Skills

	Excellent (4)	Good (3)	Needs Improvement (2)	Weak (1)
Respect	Always respects the thoughts &	Often respects the thoughts and	Seldom respects the thoughts &	Is self-centered. Has little regard
-	individual differences of others in	individual differences of others in	individual differences of others in	for others
	the workplace	the workplace	the workplace	
Cooperation	Initiates team approach and	Understands the need to seek a	Understands the need to seek a	Is antagonistic. Does not
	demonstrates team member skills	team approach and demonstrates	team approach, but lacks skills	recognize the need to work as a
		team member skills	as a team member	team
Courtesy	Always polite and considerate of	Often polite and considerate of	Seldom polite or considerate of	Never polite or considerate of
	others, their property and the			
	workplace environment	workplace environment	workplace environment	workplace environment

Technical Skills

	Excellent (4)	Good (3)	Needs Improvement (2)	Weak (1)
Use of Tools/Equipment	Always demonstrates proper use and	Often uses tools and equipment in a	Seldom uses tools and equipment	Shows disregard for proper use
	care of tools and equipment	proper manner	in a proper manner	and care of tools and equipment
Quality of Work	Work is always well done & supervisor is satisfied with final product.	Final product is usually of acceptable quality	Final product is often unacceptable	Is unable to produce a product that is of acceptable quality
Efficiency	Always demonstrates good use of time and looks for new ways to be more productive	Often uses his/her time well and works in a productive manner	Completes assigned tasks. However, could be more productive with better use of time	Is usually unproductive due to poor use of time

Greater Victoria School District #61 <u>Student Self</u> Evaluation

Company:	Supervisor:					Student:	
Work Dates:				_ Student Signature:			
Your self evaluation enables us to h	ielp yo	ou gain	maximu	m be	nefit from your partici	pation in the Youth WORK in Trades Program.	
Please complete a	ın eval	uation	and circ	le ap	propriate course for ea	ach 120 hour period of work:	
WR	K 11.	A	WRK	11B	WRK 12A	WRK 12B	
Rate yourself by circ 4 - Outstanding			ıber whic 3 - Good			ormance for each of the criteria: 1 - Needs Improvement	
Personal & Social Aptitudes							
Cooperative Abilities (teamwork)	1	2	3	4	1. Describe any specific work skills learned during your placer		
Acceptance of Constructive Criticism	1	2	3	4			
Appearance	1	2	3	4			
Punctuality	1	2	3	4			
Attendance	1	2	3	4			
Courtesy (with public and coworkers)	1	2	3	4			
Dependability and Responsibility	1	2	3	4	2 Describe your over	rall work performance and any suggestions for	
Work Qualities & Habits					improvement:	an work performance and any suggestions for	
Effort (initiative, eagerness, effectiveness)	1	2	3	4	improvement.		
Dexterity (speed, accuracy, organization)	1	2	3	4			
Follow Through (completing tasks)	1	2	3	4			
Communication Skills							
Verbal (speaking clearly)	1	2	3	4			
Listening (able to follow directions)	1	2	3	4			
Questioning (asking appropriate	1	2	3	4		ave learned in or out of school and how you applied	
questions)					them during your wo	rk placement:	
Non-verbal (eye contact, body language)	1	2	3	4			
Written (writing clearly, concisely &	1	2	3	4			
legibly)							
Technical Skills							
Use of Tools/Equipment	1	2	3	4			
Quality of Work	1	2	3	4			
Efficiency	1	2	3	4			

Youth WORK in Trades Program Final Assessment

The supervising teacher must complete an assessment for each 120 work period. Please circle the appropriate course:

	WRK 11A	WRK 11B	WRK 12A	WRK 12B
Student:			Date:	
Teacher:			Teacher Signatu	re:

This marking template is a **suggested** guideline to determine a student's final mark.

Course Breakdown:		Student Percentages:	
Employer Evaluation	40%	Employer Evaluation	%
Student Evaluation	30%	Student Evaluation	%
Student Time Log	30%	Student Time Log	%
TOTAL	100%	TOTAL	%

Employer Evaluation:

Refer to the Employer Evaluation on page 18. To obtain a mark reflective of the employer's thoughts, one could total up the marks given for all fifteen criteria, for a total out of sixty. % = (x/60)*40

Student Evaluation:

Refer to the Student Self Evaluation on page 20. To obtain a mark reflective of the student's thoughts, one could total up the marks given for all eighteen criteria, for a total out of seventy two. % = (x/72)*30

Student Time Log:

Refer to the Student Time Log on page 17. For full marks, the student will have to log the date, location, hours, and duties performed for each shift.