

SD8 Youth Trades Program YOUTH TRAIN IN TRADES APPLICATION

START HERE:

ENTER your personal information in the spaces below:

First Name:	Last Name:
School:	Current Grade
Phone:	Email:
College:	Program:
Start Date:	Year:

INSTRUCTIONS:

- A. Using Adobe Acrobate Reader (If required, obtain it for free online at <u>get.adobe.com/reader</u>):
- **1.** COMPLETE this PDF form, typing your answers into all fields. Fill in required signatures and dates.
- 2. SAVE the PDF file for your records.
- **3.** PRINT the PDF, then DELIVER to your School Counsellor OR the District Trades Training Coordinator. *OR*
- B. Using a paper copy of the form:
- **1.** FILL OUT a printed copy of the form by hand.
- 2. DELIVER to your School Counsellor OR the District Trades Training Coordinator.

For more info or assistance, please contact your School Career Education Coordinator OR Counsellor.

About the Program

INTRODUCTION

Youth Train in Trades is a dual-credit program where a secondary school student can receive grade 12 graduation credits while partaking in a Trades Training Foundational program at a technical training institute. The purpose is to provide the opportunity for earlier entry into a technical training program, apprenticeship and a rewarding career. The tuition cost for the college trade training is subsidized by the school district through monies received from the Skilled Trades BC and the Ministry of Education.

REQUIREMENTS

- A completed application including all the required signatures from school counsellor(s), parent(s) or Guardian(s), and applicant;
- The student must be registered as a student with a School District 8;
- An approved graduation plan developed with a school counsellor prior to graduation, including a defined career pathway that includes the foundation program;
- Completion of a Gr. 11 Math credit with a minimum mark of 60%
- Age at entry into Youth Train in Trades is under 19 years;
- Must complete the program by June 30th of the year they turn 19 years old;
- Remit a non-refundable application processing fee where appropriate.
- Apply at least eight months prior to the entry date in order to secure a seat.
- Partake in Student For A Day to meet instructor(s) and try out the program
- Complete the CRT (College Readiness Tool) if attending Selkirk College.

We recommend that you:

- 1. Have a 3-Year Grad Plan that includes the five mandatory courses required for graduation.
- 2. Research the trades program before starting.
- 3. Gain work experience in the trade of interest.
- 4. Develop the Essential Skills required for success in the trade (see link below).
- 5. Ensure you meet the program's entry requirements.
- 6. Visit the college for a 'Student for a Day' experience.
- 7. Improve literacy and numeracy skills to one's maximum potential.

MORE INFORMATION

SD8 Youth Trades Programs: https://www.sd8.bc.ca/programs/youth-trades

Skilled Trades BC 'Find Your Trade': <u>https://skilledtradesbc.ca/find-your-trade</u>

SkillPlan Canada "Build Your Skills" Hub: <u>https://skillplan.ca/products/build-your-skills/</u>

PROGRAM APPLICATION

D COMPLETE all fields below, including REFERENCES, then SIGN:

Please indicate two references we can contact (one should be a teacher, the other an employer): Name: Phone: Name: Position: Position:	Name:		School:	
City: Province: Postal Code: Home phone: Cell phone: Email: Indigenous Identification: O YES / O NO If YES, select Status: O Metis O Inuit O Status / O Non-Status O Treaty / O Non-Treaty Parents'/Guardians' Address (if Different): Parents'/Guardians' Address (if Different): City: Province: Postal Code: Home phone: Cell phone: Email: REFERENCES: Please indicate two references we can contact (one should be a teacher, the other an employer): Name: Phone: Position: Name: Phone: Position: SIGNATURES: Sign below indicating your intent to pursue enrollment in the Youth Train in Trades program: (By typing your name you agree that you are signing this document.) STUDENT (type your name): X Date: PARENT/GUARDIAN (type your name): X Date:	Date of Birth: (DD/MM/)	′YYY) / / /	PEN#:	
Home phone: Cell phone: Email: Indigenous Identification: OYES / O NO If YES, select Status: O Metis Inuit O Status / O Non-Status O Treaty / O Non-Treaty Parents'/Guardians' Names:	Address:			
Indigenous Identification: O YES / O NO If YES, select Status: O Metis O Inuit O Status / O Non-Status O Treaty / O Non-Treaty Parents'/Guardians' Names:	City:		Province:	Postal Code:
If YES, select Status: O Metis O Inuit O Status / O Non-Status O Treaty / O Non-Treaty Parents'/Guardians' Names: Parents'/Guardians' Address (if Different): Parents'/Guardians' Address (if Different): Province: Postal Code: Home phone: Cell phone: Email: REFERENCES: Please indicate two references we can contact (one should be a teacher, the other an employer): Name: Phone: Position: Name: Phone: Position: SIGNATURES: Sign below indicating your intent to pursue enrollment in the Youth Train in Trades program: (By typing your name): X Date: PARENT/GUARDIAN (type your name): X Date: YOUTH DISCOVER PROGRAM:	Home phone:	Cell phone:	Email:	
Parents'/Guardians' Names:	Indigenous Identification			
Parents'/Guardians' Address (if Different): Province: Postal Code: City: Province: Postal Code: Home phone: Email: REFERENCES: Please indicate two references we can contact (one should be a teacher, the other an employer): Name: Phone: Position: Name: Phone: Position: SIGNATURES: Sign below indicating your intent to pursue enrollment in the Youth Train in Trades program: (By typing your name you agree that you are signing this document.) STUDENT (type your name): X Date: PARENT/GUARDIAN (type your name): X Date: YOUTH DISCOVER PROGRAM:	If YES, select Stat	us: O Metis O Inuit O Stat	tus / ONon-Status C	Treaty / 🔾 Non-Treaty
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Position:	Please indicate two referer	nces we can contact (one shoul	d be a teacher, the other	an employer):
Name: Phone: Position:	Name:		Phone:	
Position:	Position:			
SIGNATURES: Sign below indicating your intent to pursue enrollment in the Youth Train in Trades program: (By typing your name you agree that you are signing this document.) STUDENT (type your name): X PARENT/GUARDIAN (type your name): X Date: VOUTH DISCOVER PROGRAM:	Name:		Phone:	
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(By typing your name you agree that you are signing this document.) STUDENT (type your name): X Date: PARENT/GUARDIAN (type your name): X Date: YOUTH DISCOVER PROGRAM:	SIGNATURES:			
PARENT/GUARDIAN (type your name): X Date: YOUTH DISCOVER PROGRAM:				rs program:
PARENT/GUARDIAN (type your name): X Date: YOUTH DISCOVER PROGRAM:	STUDENT (type your nam	e): X		Date:
Did vou participate in a Youth Discover Program? \bigcirc YES / \bigcirc NO	YOUTH DISCOVER	PROGRAM:		
	Did vou participate in a Y	outh Discover Program? OVF	es / O no	

If YES, indicate which program:

O Youth Discover the Trades Workshop / O Made for Trades Day / O Youth Explore Trades Sampler

EDUCATION:



Provide a PRINTED copy of:

a) the TRANSCRIPT of your secondary school courses and marks b) Your completed 3 Year Grad Plan

PLEASE NOTE!

Prerequisites for participating in the Youth Train in Trades are a Math 11 course with a minimum of 60% and English 12 completed. Note Foundations Math 11 is a pre-requisite for the Electrical Foundation program

It is suggested that you complete Pre-Calc 11, Calculus 12 and/or physics 11 or 12 if you are interested in succeeding in the Electrical Foundation programs.

LIST any experience (paid work, school courses, volunteering, and hobbies) that relate to this trade. EXPLAIN why you are interested in this trade. DESCRIBE why you feel that you are suited for this program in terms of commitment, skills, and maturity (if filling out by hand, you may attach an additional page if more space is required):

LETTER OF ENDORSEMENT: FROM YOUR SECONDARY SCHOOL COUNSELLOR

This is to verify that (Student's Name)	has discussed his/her
application for a Youth Train in Trades Program in (Trade).	

(Student's Name:) ______ has the readiness in terms of maturity, essential workplace skills, and desire to succeed in this industry training program. I have checked the student's Graduation Plan and can verify that he/she can complete graduation requirements with the credits earned through the Train in Trades Program.

SIGNATURE:

COUNSELLOR (type name OR sign): X _____

_____ Date: ____

Additional comments from counsellor:

TYPE comments in PDF field and SAVE file, or PRINT out and write comments in:

RELEASE OF INFORMATION:

declare that I HEREBY GIVE CONSENT for personal information pertaining

to myself be shared in print and/or discussed for the purpose of school planning, transitioning and/or integrated case management.

I understand that such discussions could include representatives of any/all government ministries including Health, Education, Social Services, Attorney General, RCMP, as well as any additional persons who are providing services to me.

I hereby understand that the release of information applies for the duration of time that the student is participating in the Youth Train in Trades program at Selkirk College, College of the Rockies, or other post-secondary training institutes, and their programs.

I understand that whatever information is discussed at school and transitional planning meetings, IEP meetings or Integrated Case Management meetings will be kept confidential, and not shared outside the meeting, except with people for whom I have previously given my consent for release of information.

SIGNATURE:

Ι,

Sign below (by typing your name you agree that you are signing this document):

Student Name (type name): X _____

Date:

PHOTO, VIDEO, COPYRIGHT RELEASE:

School District 8 Kootenay Lake, College of the Rockies and/or Selkirk College seek your consent to collect, retain, use and disclose photographs, videos, images and/or names of students and groups of students in a variety of publications and on the School District's or Colleges' website(s) for educational purposes, such as recognizing and encouraging student achievement, and for the purposes of building the school community and informing others about the school district, its programs and activities.

Student names and/or images may be used in:

- School District and/or College communications, such as newsletters, brochures and reports;
- School District and/or College websites, social medial sites/video channels such as Facebook and YouTube;
- External media communications such as newspaper or television or online, including photographs, videotape and/ or interviews (restricted to events where media is invited to school-related events); **
- Videos, CDs, DVDs for educational use only.

I DO GIVE MY CONSENT for School District 8 Kootenay Lake, College of the Rockies and/or Selkirk College collect, use and publicly disclose my name and/or image for purposes consistent with the above for this school year. I understand that images posted on the internet may be stored and accessed outside of Canada.

Student's Name: _____

SIGNATURE:

Sign below (by typing your name you agree that you are signing this document):

Student name (type name): X

Date: ____

**Please note that college and district staff cannot control news media access, photos/videos taken by the media or by others in public locations (e.g. field trips or off school grounds) or school events open to the public, such as sports events, student performances, school board meetings, etc. These are considered public events.

RESPONSIBILITY AGREEMENT: student and parent/guardian commitment

This is an agreement between the student, the post-secondary Technical Training institute (College) and School District 8. The purpose of this agreement is to make our shared responsibilities clear as we work towards successful completion of your training.

High School/School District Responsibilities

- Inform you of the requirements specific to your program
- Help you formulate your 3-Year Grad Plan
- Encourage you to be proactive in informing program coordinators of any specific learning needs
- Liaise with parents/guardians and high school team, regarding your progress and participation
- Ensure that you are registered with Skilled TradesBC and your college of choice
- Provide marks and credits for completion of your grade 12 graduation once foundation training is successfully completed (see page 4)
- Pay college tuition and other supports as required

Student and Family Responsibilities

- Pay for books and tool costs needed for program
- Punctual and consistent attendance to college program is mandatory.
- Successfully complete all other courses required for grade 12 graduation prior to program start.
- Any monetary deposits, book, tool, equipment or uniform costs needed for the program will be paid by the student and family.
- Provide your own safety and support materials
- Complete the College Readiness Tool (Selkirk College) and if necessary participate in a Math or English upgrade program.
- Follow the Colleges' and the School District's Code of Conduct found on District Website
- Meet the program's homework and study expectations
- Communicate any difficulties to the SD8 Youth Trades Training Coordinator and your school Counsellor.
- Make all reasonable efforts to get hands-on work experience in chosen trade area

SIGNATURES:

Sign below (by typing your name you agree that you are signing this document):

STUDENT (type your name): X	Date:
DADENT (CLIADDIAN) ()	D .

CHECKLIST:

ENSURE you have provided and completed ALL of the following in order to be eligible for entry into Youth Train in Trades:

- Completed and signed YTT Student Application Package, including: program application, program choice, release forms, and responsibility agreement
- Copy of your latest Resume (attached digital scan, or submitted in printed format)
- Transcript of your secondary school courses and marks, signed by a counsellor, in order to demonstrate your ability to complete all requirements for graduation (attached digital scan, or submitted in printed format)
- $\circ~$ Endorsement letter signed by the counsellor (attached digital scan, or submitted in printed format)
- Completed and signed trades college Application form (attached digital scan, or submitted in printed format)
- Completed and signed Skill Trades BC YTT Registration Form (attached digital scan, or submitted in printed format)
- $\circ~$ Cheque payable to Selkirk College or College of the Rockies, OR credit card information for the application processing fee
- \circ Understanding of books, safety gear, and supplies needed for the program and costs.
- Visit to the College to meet the training instructor and be a Student for a Day (SFAD)



APPLICATION FOR ADMISSION Youth Train in Trades

Enrolment Services

 Box 8500, 2700 College Way, Cranbrook, BC V1C 5L7

 Tel. (250) 489-8239 or 1-877-489-2687 local 3239
 Fax (250) 489-1790

PERSONAL DATA				
COTR Student ID. HAVE YOU PREVIOUSLY ATTENDED COTR Social Insurance Number				
Legal Last Name	al Last Name Legal First Name Legal Middle Name Former Last Name (if applical			
Telephone Number(s)	All official COTR correspondence will be n unless specified otherwise.	nailed to the p	ermanent home address	
HOME ()	Permanent Home Address			
WORK ()	Street # and Name, Apt. #, PO Box, RR/SS, Site, Comp			
CELL ()	City/Town	Province	Postal Code	
DATE OF BIRTH GENDER	Email Address			
YY MM DD 🖬 M 🖬 F	Local Address			
Who should COTR contact in case of emergency?	Street # and Name, Apt. #, PO Box, RR/SS, Site, Comp:	Γ		
Name:	Citv/Town	Province	Postal Code	
Phone Number ()	VOLUNTARY DECLARATION Are you of Aboriginal Ancestry?	•		
Name:	If yes, check all that apply:			
Phone Number ()	First Nations Métis Inuit			
	Status Non-status			
CITIZENSHIP				
Canadian Citizen Live in Caregiver Identification #				
Country of Citizenship Permanent Resident Identification #				
	International Student			
For Students With Disabilities				
To support you more effectively during your studies at College of the Rockies, please notify the Disabilities Coordinator in Student Services who will then contact you regarding your particular needs. All information received is confidential. Please contact: (250) 489-8283				
PROGRAM APPLICATION				
Before completing this section, refer to the current College of the Rockies Program Calendar (http://www.cotr.bc.ca/program-calendar) for				
information on programs available at the College. If you are unclear about which program to apply for, please contact the Student Services Office. You may wish to discuss your educational goals with an Education Advisor prior to applying.				
PROGRAM APPLIED FOR AT COTR: (Please enter the specific program name as shown in the College of the Rockies Calendar)				
Admission Status: New Student Continuing Student (Same Program) Returning Student (Different Program)				
CAMPUS: CRANBROOK INVERMERE GOLDEN CRESTON KIMBERLEY FERNIE				
DATE YOU WISH TO START:				
Intended Load:	Time ☐ Full Time Online ☐ Part Time Online ma ☐ Associate Degree ☐ BBA ☐ Oth	ner	fInstitution	

EDUCATIONAL BACKGROUND			
LAST HIGH SCHOOL ATTENDED	LOCATION: (City & Province)	From: (year) To: (year) DID YOU GRADUATE?	
PERSONAL EDUCATION NUMBER (PEN) (Current BC/Yukon Secondary Students) If you are currently attending Grade 12 in BC/Yukon, you must provide your Personal Education Number (PEN) on this form and complete the required secondary school forms (contact your high school) in order to have your grades electronically transferred from the Ministry of Education to the College. If you are currently attending Grade 12 in another province, you must submit an official transcript with final grades. If you are not currently attending secondary school, you must submit an official transcript to meet admission and course prerequisite requirements.			
	DECLARATION		
If you wish to authorize someone to act on your behalf with respect to application status, registration, financial information/activities, transcripts or graduation, please complete the Student Information Release Authorization form (available from the Registrar's Office or online).			
Freedom of Information/Protection of Privacy			
The College of the Rockies complies with the Freedom of Information/Protection of Privacy legislation of the Province of British Columbia. Information collected on application forms is used in the normal course of College operations in accordance with this legislation			
Please read the following before signing:			
I declare that the information contained in this application is to the best of my knowledge, complete and correct. I hereby agree to comply with the rules and regulations of the College.			
I understand and agree that acceptance of this application in no way guarantees admission to the program or course. The application is subject to the availability of seats.			
I understand and agree that the College reserves the right to modify or cancel any program or course without notice or prejudice.			
SIGNATURE OF APPLICANT		Date	

Note: You can also apply online at https://apply.educationplannerbc.ca/cotr



STUDENT INFORMATION RELEASE AUTHORIZATION

Enrolment Services 2700 College Way, PO Box 8500 Cranbrook BC V1C 5L7 Tel. (250) 489-8237 Toll Free 1-877-489-2687 x 3237 Fax (250) 489-8219 Email: <u>reghelp@cotr.bc.ca</u>

In compliance with the Freedom of Information and Protection of Privacy (FOIPOP), the College of the Rockies (COTR) is generally prohibited from providing certain information from your student records to a third party, such as information on grades, invoices, financial aid (including scholarships, grants, or loan amounts) and other student record information. This restriction applies, but is not limited to, your parents (under certain circumstances), your spouse, or a sponsor. It may be important for these individuals to be able to access such information, especially if they play a key role in financing your education.

You may, at your discretion, grant the College permission to release information about your student record to a third party by submitting a completed *Student Information Release Authorization* form to the Registrar's Office. The specified information will be made available only if requested by the authorized third party. The College does not automatically send this information to the third party. Authentication of the caller will be required before release of this information by telephone.

Submit your completed form to the COTR Registrar's Office at the address given above. Please note that your authorization to release information has *no expiration date;* however, you may revoke your authorization at any time by submitting this request to the Registrar's Office.

Student Information (Please print all information below):

Name (first, middle initial, last)

Please check one or more of the boxes below to grant authorization of information specified:

Grades/GPA, personal information, enrolment, academic progress status and other information related to academics

- Invoices, charges, credits, payments, past due accounts, and/or collection activity
- Financial aid awards, application data, disbursements, eligibility and/or financial aid satisfactory academic progress status, College-maintained loan disbursements and loan repayment history
- □ Tuition, Education, and Textbook Amounts Certificate (T2202A form)

I WISH TO REVOKE my authorization to release information to the designate mentioned below

•

Authorized Designate(s):

Name of Designate (first, middle initial, last)

Relationship to Student

Student Number

To ensure security of your student record, please have your designate^{**} (e.g. parent or spouse) provide two security questions and answers. This information will be kept on your file and COTR staff will only provide information you have agreed to release to the person who can provide answers to those questions.

Authentication questions and answers:

Question #1:	
Answer #1:	
Question #2:	
Answer #2:	

**Sponsors are required to relay the details of the sponsorship and the name of a contact person.

Certification

I acknowledge that this authorization starts as of the date this form is signed and has no expiration date, however, I can revoke the authorization at any time by submitting a written request to the Registrar's Office. By signing this form, I authorize the College of the Rockies to release the information specified to the person(s) listed above. The purpose of this authorization is to assist the person(s) in supporting me (financially or otherwise) in connection with my College of the Rockies education.

Student Signature

Date

SKILLEDTRADES^{BC}

YOUTH TRAIN IN TRADES REGISTRATION FORM

Please complete and return this form to your district career coordinator. All *mandatory fields must be completed.

*Legal First Name:	Legal Middle Name (s):	*Legal Last Name:
*Date of Birth (MM/DD/YYYY):	*Gender : ☐ Man ☐ Woman ☐ Non-Binary ☐ Prefer not to and	Personal Education Number (PEN):
*Suite Number:	*Mailing Address:	
*City:	*Province:	*Postal Code:
*Primary Phone Number: ()	Secondary Phone Number: ()	*Email Address:
Do you agree to receiving updates vi	a SMS to your primary phone number? [Yes 🗌 No
*Do you self-identify as an Indigenou □ Yes □ No □ Prefer not to answer	is person?	

B. PARENT/GUARDIAN'S INFORMATION

I,		
(F	print surname followed by given names of parent/g	guardian)
of		
(street address)	(city, town)	(postal code)
Declare that:		
1. I am the 🗌 custodial parent 🗌 legal guardian	n of the minor named above; and,	
2. I authorize the school to release the informat SkilledTradesBC in a Youth Trade program; and		dTradesBC for the purpose of registering the student with r statistical data.

3. I understand that I can only withdraw this consent by written request addressed to the school.

Student's Signature:	Date (MM/DD/YYYY)
Parent/Guardian's Signature:	Date (MM/DD/YYYY)
SD/Independent Board Authority Contact's Signature	Date (MM/DD/YYYY)

C. PROGRAM INFORMATION (TO BE COMPLETED BY SCHOOL DISTRICT OR INDEPENDENT BOARD AUTHORITY)

Program Type (Select one):	TRAIN Intake (MM/YYYY):	Program Start Date (MM/DD/YYYY):	Program End Date (MM/DD/YYYY):
*Trade Name:			•



School Name:

Student First Name:	Last Name:		
Gr 9 Date:	Gr 10 Date:	Gr 11 Date:	Gr 12 Date:
Initials:	Initials:	Initials:	Initials:

Program:

French Immersion Aboriginal Education

Youth Trades Programs:

Skills Explore (Grade 10) Trades Sampler Youth Work in Trades Youth Train in Trades (Foundation or AP1)

Graduation Requirements (Dogwood Diploma)

	Summary of Graduation	on Requirements: Dogw	ood Diploma
	Grade 10	Grade 11	Grade 12
Required:	minimum 52 credits		
English Language Arts	Choose two 2-credit courses: Composition 10 Creative Writing 10 Literary Studies 10 New Media 10 Spoken Language 10 EFP Writing 10 EFP Literary Studies 10 EFP New Media 10 EFP Spoken Language 10	Choose one 4-credit course: Composition 11 Creative Writing 11 Literary Studies 11 New Media 11 Spoken Language 11 EFP Literary Studies and Writing 11 EFP Literary Studies and New Media 11 EFP Literary Studies and Spoken Language 11	Choose one 4-credit course: English Studies 12 English First Peoples 12
Mathematics	Choose one 4-credit course: Foundations of Mathematics and Pre-calculus 10 Workplace Mathematics 10	Choose one 4-credit course: (Grad Foundations of Mathematics 11 Pre-calculus 11 Workplace Mathematics 11 History of Mathematics 11 Computer Science 11	de 1 or Grade 12) Foundations of Mathematics 12 Apprenticeship Mathematics 12 Pre-calculus 12 Calculus 12 Geometry 12 Statistics 12 Computer Science 12
Science	Required 4-credit course: Science 10	Choose one 4-credit course: (Grad Physics 11 Life Sciences11 Chemistry 11 Earth Sciences 11 Science for Citizens 11 Environmental Science11	le 11 or Grade 12) Physics 12 AnatomyandPhysiology12 Chemistry 12 Geology 12 Environmental Science 12 Specialized Science12
Social Studies	Required 4-credit course: Social Studies 10	Choose one 4-credit course: (Gradu Explorations in Social Studies 11 Francophone History and Culture 11	e 1 or Grade 12) B.C. First Peoples 12 Contemporary Indigenous Studies 12 Comparative Cultures 12 Comparative World Religions 12 Economic Theory 12 Human Geography 12 Physical Geography 12 Urban Studies 12 20th Century World History 12 Asian Studies 12 Genocide Studies 12 Political Studies 12 Law Studies 12 Philosophy 12 Social Justice 12

	Summary of Graduation	n Requirements:	Dogwood Diploma
	Grade 10	Grade 11	Grade 12
Arts Education/ ADST	Choose 4 credits at either Grade 10, Grade 11, or Grade 12 Arts Education or Applied Design, Skills, and Technologies (ADST) (see BC Curriculum) Culinary Arts Food Studies Drafting Electronics & Robotics Metalwork Power Technology Woodwork Automotive Technology Engineering Engine and Drivetrain Furniture and Cabinetry Mechanical and Welding		
Career Education	Required 8 credits in Career Education (Grade10, Grade 11, or Grade 12) Career-Life Education (can be done as part of Skills Explore or Trades Sampler) Career-Life Connections (including 30 hours of work experience or career-life exploration) (can be done as part of Youth Work in Trades and/or Youth Train in Trades		
Physical and Health Education (PHE)	Required 4-credit course: Physical and Health Educatic	n 10	

Electives: minimum 28 credits

Depending on the school's offerings and student's choice, the number of electives in each Grade level will vary. The 28 elective credits in Grades 10-12 can come from the following options:

- Ministry-developed or Ministry-approved courses
- Board/Authority Authorized (BAA) courses
- Independent Directed Studies (IDS)
- External CredentialsPost-Secondary ("dual") credit
- Work Experience (WEX)

Elective Courses	Grade 10: 2-5 electives	Grade 11: 3-5 electives	Grade 12: 6-8 electives*
	•	•	•
	•	•	•
	•	•	•
	•	•	•
	•	•	•

Total: 80 credits required for graduation

* at least 16 credits must be at the Grade 12 level, including a required Grade 12 Language Arts course.

Graduation Program Assessments		
Required for Graduation	Grade 10 Numeracy Grade 10 Literacy	Grade 12 Literacy Beginning in the 2021/22 school year.

List any courses currently being taken at another school (includes online):

Course Name

Course Level

Other School Name

Comments:

Student Signature	Parent/Guardian Signature	
Graduation Plan Program Reviewed by:		
Counsellor	Date(s):	
Principal/Vice-Principal	Date(s):	
District Team	Date(s):	