STATEMENT OF UNDERSTANDING

I understand that:

I will be interviewed by the Cooperative Education teacher and placement supervisor(s) to be considered for the placement.
The Cooperative Education Program requires me to spend considerable time in the community as a Co-op student, and as such I will represent the school in a favourable manner.
I must conform to all Policies and Procedures of the program with respect to the following:
 attend regularly and punctually both in school and at the placement until the end of the scheduled period as defined by the Work Education Agreement report all absences promptly to supervisor and school at beginning of each work day and provide reason for the absence make up the required hours missed at the placement complete all required assignments, both in-school and at the placement abide by the Policies and Procedures of my placement maintain strict confidentiality regarding placement matters hours worked outside of the contracted time must be submitted in advance to the Co-op teacher and employer
Course expectations of my related course, Co-op course and the expectations of the employer identify the tasks that I will be performing as part of my Co-op placement.
I should not expect to be paid for my Co-op hours.
Any adjustment to Co-op hours to accommodate extra curricular activities and part time employment must be co-operatively arranged.
If my placement pays me a wage for the hours stated on my Work Education Agreement, or if I stay at my placement beyond the hours stated on my Work Education Agreement and I am paid for those hours, Workplace Safety and Insurance coverage must be provided by the employer. It is my responsibility to ensure that this coverage is in place.
I am responsible for transportation to and from the placement. It is the recommendation of the York Region District School Board that I use public transit and that if I choose to drive a vehicle to my placement, I must be covered by my own insurance. Appropriate Board forms must be completed if driving or riding in a private vehicle. (<i>Forms: Co-op6-01/ncr3, NP 679-01, NP679-02.</i>)
I must declare to the Co-op teacher any medical condition that may affect my performance at the Co-op placement.
I may be required to have a medical examination and/or provide medical information to meet placement requirements.

Immunization is required for some placements and that I am responsible for this at my own expense.
Some placements require a security check, character check, credit check, or other pre- placement screening and that I may be responsible for this at my own expense.
Certain placements may require additional specialized application forms and subsequent interviews prior to acceptance.
I may have to wear prescribed clothing for my placement (e.g. safety equipment, business attire, nursing smock, lab coat).
I must have the Work Education Agreement (Workplace Safety and Insurance Board) signed by all parties before beginning work at the placement. It is my responsibility to obtain approval and signatures of all parties before making any changes to agreed upon hours.
I must observe all health and safety regulations at the placement and contact the placement supervisor and the school the same day in case of accident, even if it does not require medical attention.
It is strongly recommended that I purchase Student Accident Insurance.
My Co-op teacher needs to provide relevant information about me to a prospective supervisor for placement purposes. (IEP with approval.)
Theft or vandalism is grounds for termination of my Co-op placement and/or removal from the Co-op Program with loss of credits and possible further action under the law.
I must provide my Co-op teacher with updated information should there be any change in the data provided by me while I am enrolled in Co-op (e.g. change of address, phone, emergency contact information, medical information, mode of transportation).
I can be removed from the Co-op Program with loss of credits if I am unable to meet program requirements either in school or at the placement. If I drop my related in school course, I must also drop my Co-op course.
OYAP students must also complete the following:
☐ If I am placed in a skilled trade as an OYAP student, I may, with the support of my employer, sign an Apprenticeship Agreement with the Ministry of Training, Colleges and Universities' Apprenticeship Branch, and begin my formal apprenticeship training.
☐ I may be registered as an OYAP Apprentice if I am required, during my placement to work on restricted skills as defined under Ontario Reg. 565/99 of The Apprenticeship Certification Act.