



Create Career College

Create Your Future Here

Collection Form for Co-op Opportunity

Instructions:

1. This form **MUST** be fully completed and submitted **within ONE month** since the date you receive this form, and please email it to our Student Coordinator, Sherry: sherryl@createcareercollege.com.
2. Please attach your most recent and updated **Resume/CV** along with this form.
3. ALL signatures are **required** for the form to be considered complete.

Student Name:	Student Number: CCC
Date of Birth:	Email:
CCC School Advisor:	Program:
Program Start Date:	Program Completion Date:

* The program information can be found in your Letter of Acceptance issued by CCC.

- PLEASE PRINT CLEARLY -

The parent/guardian and student give permission for the release of confidential information pertaining to the student selection process.

- It is understood that the student advisor will endeavor to find an appropriate Co-op placement for the student;
 - It is understood that the school will provide ONE Co-op opportunity each time until the student receives an offer;
 - It is understood that students are responsible for all costs associated with their placement.
- Optional: I will also be looking for a Co-op position by myself (check if applicable).
- [Indeed.com](https://www.indeed.com)
 - [Canada Job Bank](https://www.canada.ca/en/employment-society/services/job-bank.html)

<p>The DATE you plan to enter Canada</p> <p>____ / ____ / ____ Month Day Year</p> <p>The number of hours you plan to work per week</p> <p>Preferred shift length per day</p>	<p>The DATE you plan to start the Co-op job</p> <p>____ / ____ / ____ Month Day Year</p> <p><input type="checkbox"/> 20~30 hours (part-time)</p> <p><input type="checkbox"/> 30~40 hours (full-time)</p> <p><input type="checkbox"/> Others: _____</p> <p><input type="checkbox"/> 4~6 hours (part-time)</p> <p><input type="checkbox"/> 6~8 hours (full-time)</p> <p><input type="checkbox"/> Others: _____</p>
---	---



Create Career College

Create Your Future Here

Co-op Occupation Preferences

(Please provide at least 2 options in order of preference)

1. Title/ Job Industry:

2. Title/ Job Industry:

3. Title/ Job Industry:

Locations Preferred

1. Province, City:

2. Province, City:

3. Province, City:

Experience you have related to the above industries

Future goals after completing the diploma program

1. COLLECTION OF PERSONAL INFORMATION: Personal information is collected under the legal authority of the Education Act & Co-operative Education & Other Forms of Experiential Learning Policies & Procedures Document. The information collected on this form will be used for (i) the purposes of assessing and determining suitable candidates for a Cooperative Education program, (ii) enrolling successful candidates in the program, and (iii) matching the candidates to an appropriate cooperative education placement.

2. CONSENT TO DISCLOSE PERSONAL INFORMATION: To permit a Cooperative Education placement, it is necessary for the Create Career College to share the names, contact information, work experience, and academic achievements of individuals who are being considered for a Cooperative Education placement with internal and external participating businesses and agencies. By submitting this form you are consenting to Create Career College sharing the information contained in this application form as required.

Signature of the Student

Date