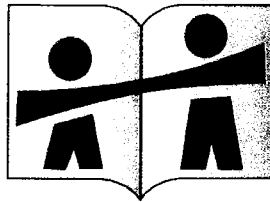


School District No. 23
DUAL CREDIT PROGRAMS

School District No.23
Central Okanagan



Together We Learn



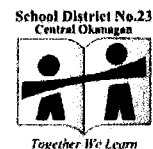
**DUAL
CREDIT**

STUDENT APPLICATION

- Students applying for the following Okanagan College Dual Credit Programs need to complete this application package.
 - **Health Care Assistant**
 - **Certified Education Assistant (CEA)**
- Return the completed application package to your school's Career Life Programs/Counselling center.
- You will be notified once the application has been reviewed.



School District No. 23 Dual Credit Programs



GETTING STARTED

- Students/parents meet with their school Career Coordinator/counsellor to review program options.
- Students should not be taking a post-secondary programs unless they have met the prerequisites and are prepared to attend all classes and complete all course work.
- Careful consideration should be exercised when deciding on enrolling in post-secondary courses. College courses will be permanently recorded on your post-secondary file.
- Withdrawal process: If you are not able to complete the program you may withdraw without academic penalty as per Okanagan College's policy. See <http://www.okanagan.bc.ca/>.

HOW TO APPLY:

- See your school career coordinator/counsellor prior to filling out application.
- Students are to return the completed application package to their school career coordinator/counsellor.

For schools only:	
• <i>CEA Applications</i>	• <i>submit to Doug Meraw at George Elliot Secondary</i>
• <i>Health Care Assistant Applications</i>	• <i>submit to Bob Boback at Hollywood Road</i>

- A Career Coordinator will contact you to notify you of your acceptance and what the next steps are.
- Students are accepted based on a first come-first serve basis in addition to meeting the prerequisites and the student's readiness for an adult learning program.
- Where the number of applicants exceed availability a waitlist may be created.

APPLICATION SUBMISSION CHECKLIST. (check off items as you complete)

- Okanagan College Permission to Release Information Form
- Completed and signed Accountability Agreement
- Completed and signed Student Graduation and Transition Plan
- High school transcript (DVR)
- Teacher Recommendation Form
- Okanagan College application (paper version)
- Criminal Record Check (**Students must submit this form and payment on their own. Do not hand this part of the application back into the Career Center.** Use attached application and provided access codes for criminal record check)

NOTES:

- Incomplete applications will delay registration.
- Tuition fees only will be paid by SD No. 23. You are responsible for books/supplies and ancillary fees.
- Fees are subject to change.



DUAL CREDIT APPLICATION FORM

Okanagan College
ID Number (if known) _____ / _____ / _____

FOR OFFICE USE ONLY	<input type="checkbox"/> Non-refundable \$30 fee paid.
	<input type="checkbox"/> Not applicable
	DATE/TIME:
	INITIALS:

Personal Information - Please Print Clearly

Legal Last or Family Name	First Name	Middle Name(s)																
Previous (Maiden) Name (if applicable)	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female																	
E-mail Address <i>(Okanagan College uses email and mail to communicate with all applicants. Please ensure you have entered your email address correctly. It is your responsibility to provide the College with your current email so we can communicate important information to you)</i>																		
Permanent Address (correspondence regarding your application will be mailed to this address)		City/Town																
Province/State and Country		Postal Code/Zip Code																
Telephone - Primary ()		Telephone - Alternate ()																
Date of Birth																		
	<table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> </tr> <tr> <td>day</td> <td>month</td> <td colspan="4">year</td> <td></td> <td></td> </tr> </table>									day	month	year						
day	month	year																
Country of Citizenship	Note: Non-Canadians must submit proof of Immigration status with application (original documents must be submitted to Okanagan College for photocopying). Permanent Resident/Landed Immigrant Effective Date: <table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> </tr> <tr> <td>day</td> <td>month</td> <td colspan="4">year</td> <td></td> <td></td> </tr> </table>										day	month	year					
day	month	year																
Emergency Contact Name																		
Emergency Contact Telephone - Primary ()	Emergency Contact Telephone - Alternate																	

Program Name	Term
_____	<input type="checkbox"/> Fall (September)
Campus	<input type="checkbox"/> Winter (January)
<input type="checkbox"/> Salmon Arm <input type="checkbox"/> Vernon <input type="checkbox"/> Distance	<input type="checkbox"/> Summer Session I (May)
<input type="checkbox"/> Kelowna <input type="checkbox"/> Penticton <input type="checkbox"/> Revelstoke	<input type="checkbox"/> Summer Session II (July)

High School

Personal Education Number (PEN) _____ / _____ / _____ (if known)					
Current School	City/Province	From Year/Month	To Year/Month	Currently Attending	Grade/Year Completed

Voluntary Disclosure

Do you identify yourself as an Aboriginal person, that is, First Nations, Métis, or Inuit?

If you answered Yes No, please indicate if you are:

- First Nations Métis Inuit

Do you identify yourself as a first generation student, that is, neither of your parents attended a post-secondary institution (college or university) in Canada?

- Yes No

What influenced your decision to apply today?

Select up to three.

- High school counsellor
- Friend, parent or family member
- Someone from OC was at my high school
- Someone from OC was at a fair or trade show
- OC on Facebook or other social media
- OC website
- OC advertisement
- Another website such as educationplanner.com
- Referral from overseas agent

1) Is your educational goal to complete an entire program of study (any length) at Okanagan College?

2) (Degree, Diploma etc.)

- Yes No

2) If you answered "No" to question 1, what is your educational goal at Okanagan College?

- Study for two years at Okanagan College
- Take a few courses at Okanagan College
- Study for one year at Okanagan College
- I haven't decided yet
- Other _____

3) After achieving your educational goal, what do you intend to do next?

- Enter or re-join the workforce
- Transfer to another college, university or institute
- Nothing in particular - I'm here for general interest
- I haven't decided yet
- Other _____

Personal Information

Okanagan College is a public body governed by the *Freedom of Information and Protection of Privacy Act (FIPPA)*, which permits us to collect, use and share your personal information only for authorized purposes. We collect, use and share personal information that relates directly to and is necessary for Okanagan College's programs and activities. The information on this form is collected under the authority of the FIPPA, the *College and Institute Act* and from other government agencies. The information will be used for the purposes of admission and registration. If admitted, your personal information is used and shared for a variety of purposes consistent with our mandate. Your information may be shared with the students' association, the alumni association and the Okanagan College Foundation for purposes such as provision of student services; alumni development; recognition of academic excellence, convocation program and donor awards. Information may also be used for research purposes but in those cases, individual identities will not be disclosed. Additional information may be found in our "Protection of Privacy Policy" on the Okanagan College website. Questions about the collection, use and sharing of your personal information may be directed to the Registrar.

Under the FIPPA, staff may not release personal information such as your student record or registration to anyone other than you without your consent. We must, therefore, deal directly with you on all inquiries, transactions or appeals. If, for any reason, you need a parent or other person to act on your behalf, and wish to give them full authority to do so, you must provide Okanagan College with your written consent authorizing the release of your personal information to that person by completing a "Consent to Release Information" form which can be found in your myOkanagan account at <http://myokanagan.bc.ca>.

Communication: Communications from the College will be by email in most cases. Other important information and policies can be found on the College website. Please notify the College of any change to your email address. Please refer to the "Electronic Communication for Students and Applicants Policy" in the Calendar for details: www.okanagan.bc.ca/calendar.

Declaration and Consent: I certify that the information contained herein and that all statements made in connection with this application are true, correct and complete. I understand that any misrepresentation, incomplete disclosure or falsified information on this application may result in the cancellation of my admission or registration status. I consent for the College to collect and use my personal information. I agree that Okanagan College may verify the information provided by contacting any secondary or post-secondary institutions. I authorize Okanagan College to access Okanagan University College (OUC) records in the event I previously attended OUC. I understand and agree that my admission will not be final until my file is complete and I have satisfied all document and other requirements by Okanagan College. I authorize the posting of my grades where such posting identifies me only by my personal OC student ID number.

I understand and agree to abide by the rules, regulations and policies of Okanagan College as outlined in the Calendar and on the Okanagan College website, as amended, while I am a student at Okanagan College. In the event there is a conflict between verbal advice and Okanagan College's official Calendar, regulations and policies, I will rely on the official version only.

I agree to pay all tuition, fees and charges to Okanagan College within the payment deadlines posted by the College.

Applicant's Signature: _____

Date of Application: _____



APPLICATION FORM

(Please print neatly)

Name _____
Last Name First Name Middle Name

Address _____ City _____

Home Phone # _____ Student Cell # _____ Postal Code _____

Date of Birth (dd/mm/yyyy) _____ SIN _____

Are you of First Nations Heritage? Yes No Canadian Citizen yes No

Student email address: (all info is sent to this address) _____

Parent email address: _____

Parent / Guardian Contact _____

Home Phone # _____ Work/Cell # _____

Emergency Contact Person _____

Home Phone # _____ Work/Cell # _____

√ Student is **NOT** _____ on an IEP or a Learning Plan

√ Student is **currently** on a _____ IEP or a _____ Learning Plan _____ Behaviour Support Plan

I/We certify the information given in this application is true and complete to the best of my knowledge and understand that, if selected for a Dual Credit Program, falsified statements may be reason for removal. I authorize investigation of all statements contained herein and the references listed in this application. I allow the Dual Credit Department to communicate to all Post-Secondary Institutions for educational purposes relating to my selected field of study. I allow the Dual Credit Programs Department to use any work or school related picture of myself for the purpose of promotion and communication of the program.

Parental Note: Some of the content of the program may be adult oriented. By signing this form, you are acknowledging that you are aware that some of the content in the program is mature in its nature and you are granting your child permission to fully participate in all aspects of the program.

Criminal Record Search: Where applicable, applicants must complete an RCMP criminal records check to ensure suitability in working with a vulnerable sector. By signing this form, parents/guardians are agreeing to allow their student to complete the criminal record search at the student's cost, prior to acceptance into the program. Students must submit the CRC on their own – do not return to school.

Student Signature _____ **Date** _____

Parent/Guardian (print name) _____

Parent/Guardian Signature _____ **Date** _____

Applications will not be accepted without all signatures in place.



Teacher Statement of Recommendation



Thank you for completing the *Teacher Statement of Recommendation* regarding the student named below. The information on this reference will be used to determine candidates for the SD No. 23 Dual Credit Programs. A quality response to the general comments section is also important.

Student Name: _____

Teacher: _____ Class: _____

School: _____ Teacher Phone #: _____

	<i>Excellent</i>	<i>Very Good</i>	<i>Good</i>	<i>Fair</i>	<i>Poor</i>
1. Attendance/Punctuality Comments: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Work Ethic Comments: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Attitude Comments: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Mechanical Ability in Field Comments: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Initiative/Motivation Comments: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Interpersonal Skills/Citizenship Comments: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. General Comments: _____ _____					

Teacher Signature: _____

Date: _____



Permission to Release Personal Information



In order to comply with privacy legislation and college policy, any student who wishes Okanagan College to release their personal information to a third party must complete and sign this form.

Student Name: _____

Address: _____ City: _____

Postal Code: _____ Phone No: _____ Cell: _____

Email address: _____

To Okanagan College,

Please release the personal information that I have checked below to the following group:

- **School District No. 23 Career Life Programs Staff**

- | | |
|--|---|
| <input checked="" type="checkbox"/> Name | <input checked="" type="checkbox"/> Transcript of Academic Record |
| <input checked="" type="checkbox"/> Address | <input checked="" type="checkbox"/> Confirmation of enrolment |
| <input checked="" type="checkbox"/> Phone Number | <input checked="" type="checkbox"/> ABLE Test Results |
| <input checked="" type="checkbox"/> Letter of Acceptance | <input checked="" type="checkbox"/> Registration Information |

The student may rescind or amend this authorization in writing at any time. Submit the completed form with an original signature to the Registrar.

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____



RESPONSIBILITY AGREEMENT



High School/School District/Okanagan College Responsibilities

We will:

- provide Okanagan College tuition funding only for approved programs.
- inform you of the program prerequisites and requirements.
- help you create a transition plan that helps you navigate high school graduation and transition into post-secondary.
- work with Okanagan College admissions to ensure you are enrolled in your program of choice.
- assist you with the identification of student support services as needed (assessment, learning skills, math & English upgrading, disability services, etc.)
- liaise with your parents, high school teachers, and Okanagan College instructors regarding your participation in the program.
- report post-secondary marks for your high school transcript.

Student Responsibilities

As a SD No. 23 Dual Credit student I agree to:

- Ensure that I meet with my counsellor and career program coordinator to plan my high school timetable and transition plan to ensure I have all the prerequisites and grad requirements.
- Submit a completed application package to my school's career center and pay any applicable application/requisite fees to Okanagan College.
- Communicate with Okanagan College admissions to ensure all prerequisites and payments are made on time.
- Pay all required fees for student ancillary fees and textbooks/supplies.
- Be prepared to fully commit to the rigors of post-secondary school and agree to match course hours with home study.
- Contact my instructor if I will be late or absent. Daily attendance and punctuality are required at the post-secondary level. Failure to attend daily, and on-time may result in removal from the program without any refund.
- Inform Okanagan College, your parents, and your home school (counsellor and career coordinator) if you withdraw from the program. Remember withdrawing from the program may affect your permanent post-secondary record.
- Follow the Okanagan College General Academic Regulations and Policies regarding student conduct, withdrawal, etc. (<http://webapps-5.okanagan.bc.ca/ok/Calendar/GeneralAcademicRegulationsandPolicies>)
- I will continue to respect the School District No. 23 student code of conduct regardless of program location.

Student Name (print clearly) _____

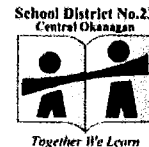
Date _____

Student Signature _____

High School _____

Parent/Guardian Name (print) _____ Parent/Guardian Signature _____

Career Coordinator Name (print) _____



Criminal Record Check

Certified Education Assistant Program only.

Students applying for the Okanagan College Education Assistant (CEA) or Health Care Assistant (HCA) program must complete a Criminal Record Check (CRC) as a prerequisite to admittance into the program. **This CRC application should only be done once the student has been accepted into the Dual Credit program.**

Students must complete the attached Criminal Record Check form, and if paying by credit card, the Application for Pre-Authorized Credit Card usage must be filled in and submitted with your criminal record application. **Students must send the CRC Form directly to the address provided on the form. Do not send the CRC Form back to the high school.**

How to:

- Fill out attached **"CONSENT TO A CRIMINAL RECORD CHECK for working with children and/or vulnerable adults."**
- If you are submitting a Criminal Record Consent form, complete the **APPLICATION FOR PRE-AUTHORIZED CREDIT CARD USAGE** (PDF) to pay by Visa or MasterCard, or enclose a money order or a certified cheque payable to the Minister of Finance with your form. Fees cannot be returned.

For more information on the Criminal Record Check please see:
<http://www2.gov.bc.ca/gov/content/safety/crime-prevention/criminal-record-check>

Notes:

- Acceptance into the program is contingent on the student getting the criminal record check up to 6 weeks before the start of the program. The criminal record check application should be completed early in the application process to allow for processing time.
- Students are required to pay the \$28 fee for the criminal record check. They can use the attached "APPLICATION FOR PRE-AUTHORIZED CREDIT CARD USAGE to submit with their consent to a criminal record check form or they can attach a money order or a certified cheque with their criminal record check application.
- Students must use the attached form to complete their criminal record check and **must indicate the access code and contact person at OC who is to receive the record check.**

Program	Contact Person	Access Code
Health Care Assistant	Ardeth Anderson	RMBGSV4DK8
Education Assistant (CEA)	Tanya Eli	Z4CCK7EPAL

- **Students must send the CRC Form directly to the address provided on the form. Do not send the CRC Form back to the high school.**
- The results of the criminal record will automatically be forwarded to Okanagan College's Continuing Education department for review.

Transition Plan

Develop your Education/Transition Plan with the help of your counsellor/career coordinator. Include the program name in your Transition Program.

Name: _____ High School _____ Date: _____

1. Ensure that you have included and considered your graduation requirements in your Education/Transition Plan.
2. You may need to modify your timeline to achieve your graduation. Students must be high school graduates when they complete their Okanagan College program.
3. Complete the 3-year Education/Transition Plan in full, starting with your grade 10 courses.
4. Timetable changes should be made with approval from your Career Coordinator/Counsellor.

1. Required Courses – 52 credits in courses listed below.		2. Elective Courses – 28 credits	
Course	Credits	Course	Credit
English 10	4	English/Com 11	4
Fine Arts 10	4	Social Studies 11, Civics 11, First Nations 12	4
Science 10	4	Math 11 or 12	4
Math 10	4	Science 11 or 12	4
Phys-Ed 10	4	English/Com 12	4
Planning 10	4	Grad Transitions 12	4
Social Studies 10	4		
Note: Graduation = Minimum 4 Grade 12 level courses + Grad Transitions 12			

Students are required to complete a minimum of 80 credits (20 4-credit courses) in Grades 10-12 for graduation. Many students have well over 80 credits upon graduation.

Students can choose to complete elective courses through a Dual Credit Program.

Transition Pathway:

Business Health

Technology Trades

Communications Science

Specific Career: _____

Grade 10		Grade 11		Grade 12		Post-Secondary	
Sem 1	Sem 2	Sem 1	Sem 2	Sem 1	Sem 2	Transition Program/Course(s)	
Total Credits		Total Credits		Total Credits		Total Credits	
Total Credits Predicted (Required + Electives)=		Total Credits Predicted (Required + Electives)=		Total Credits Predicted (Required + Electives)=		Total Credits Predicted (Required + Electives)=	

Career Teacher/Counsellor (print name) _____ Career Teacher/Counsellor signature _____ Date _____

Student Signature _____ Parent/Guardian Signature _____ Date _____