

STUDENT PLACEMENT APPLICATION FORM

Personal Information

Name of Student:
Address:
Primary Contact Number:
Emergency Contact Number:
Status in Canada: Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Visa Student <input type="checkbox"/> Other <input type="checkbox"/>

Educational Information

Name of Institution:	
Program of Study:	
Program Type: Degree <input type="checkbox"/> Diploma <input type="checkbox"/> Certificate <input type="checkbox"/>	
Length of Program:	Expected month/year of completion:

Placement Request Information

Term	Start Date	End Date	Total # of Hours Requested		
<ul style="list-style-type: none"> • Spring <input type="checkbox"/> • Fall <input type="checkbox"/> • Winter <input type="checkbox"/> 					
Hours and days of the week available:	Mon	Tue	Wed	Thu	Fri

Institution Contact Information:

Name of Placement Coordinator:	
Telephone #:	Email:

Indicate your placement goals/objectives:

List in priority a total of 4 choices (from 1 to 4, top to low) the CICS programs that you are interested to be placed:

Early Years:	1 (<input type="checkbox"/>) 2 (<input type="checkbox"/>) 3 (<input type="checkbox"/>) 4 (<input type="checkbox"/>)	Language Training (LINC):	1 (<input type="checkbox"/>) 2 (<input type="checkbox"/>) 3 (<input type="checkbox"/>) 4 (<input type="checkbox"/>)
Employment:	1 (<input type="checkbox"/>) 2 (<input type="checkbox"/>) 3 (<input type="checkbox"/>) 4 (<input type="checkbox"/>)	Settlement Services:	1 (<input type="checkbox"/>) 2 (<input type="checkbox"/>) 3 (<input type="checkbox"/>) 4 (<input type="checkbox"/>)
Family & Seniors:	1 (<input type="checkbox"/>) 2 (<input type="checkbox"/>) 3 (<input type="checkbox"/>) 4 (<input type="checkbox"/>)	Volunteer & Engagement:	1 (<input type="checkbox"/>) 2 (<input type="checkbox"/>) 3 (<input type="checkbox"/>) 4 (<input type="checkbox"/>)
Food & Garden:	1 (<input type="checkbox"/>) 2 (<input type="checkbox"/>) 3 (<input type="checkbox"/>) 4 (<input type="checkbox"/>)	Youth Program:	1 (<input type="checkbox"/>) 2 (<input type="checkbox"/>) 3 (<input type="checkbox"/>) 4 (<input type="checkbox"/>)

Please email your completed application form along with cover letter and resume
to: student.placement@cicscanada.com