

CERTIFICATE OF COMMENDATION

REGISTERED APPRENTICESHIP PROGRAM



[INSERT SCHOOL NAME]

takes pleasure in congratulating

[INSERT STUDENT NAME]

for successfully completing the requirements of the
Registered Apprenticeship Program
in accordance with the criteria of
Northern Gateway Public Schools and Alberta Education

Principal

School Off Campus Teacher

Date

[INSERT SCHOOL LOGO HERE]

[POSITION LOGO BEHIND TEXT]



Northern Gateway
Public Schools