

**STUDENT INFORMATION**

Student Name		Student Phone Number	
School		Grade	
Parent Name		Parent Phone Number	
Address	Town	Province	Postal Code

**UNDERSTANDING**

I hereby consent to my child, the above-named student, to be placed in a registered work site for the purpose of off campus education and/or work experience.

I understand that:

- neither the above-named school nor Northern Gateway Public Schools shall be held liable nor responsible for my child's transportation to and from the workplace,
- there may be no remuneration for my child in his/her off campus education work placement,
- my child will be:
  - accountable for prompt and regular in attendance at both school and work,
  - required to contact the employer and the school if absent from work,
  - expected to conform to company rules and regulations,
  - responsible for coordinating with his/her teacher(s) to arrange to complete missed class work or assessments,
  - monitored at the work site by the School Off Campus Teacher on a regular basis,
  - provided training and work assignments by a specified supervisor,
  - expected to accept direction and evaluations from authorized supervising personnel,
  - covered by Workers' Compensation,
  - granted credits upon the successful completion of the program.
- my child may be withdrawn from a work placement at the request of the employer by notice to the School Off Campus Teacher.

**DECLARATION**

**This form is submitted with the purpose and intent of my child participating in off campus education.**

Parent/Guardian Signature	Date
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