



# 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 Advisor, Sherry: [sheryl@createcareercollege.com](mailto:sheryl@createcareercollege.com).
2. Please attach your most recent **Resume/CV** along with this form.
3. ALL signatures are **required** for the form to be considered complete.

<b>Student Name:</b>	<b>Student Number: CCC</b>
<b>Date of Birth:</b>	<b>Email:</b>
<b>Advisor:</b> <input type="checkbox"/> Amy <input type="checkbox"/> Charlie <input type="checkbox"/> Kimo <input type="checkbox"/> Sherry	<b>Program:</b>
<b>Program Start Date:</b>	<b>Program Completion Date:</b>

\* 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.
- I will also be looking for a Co-op position by myself (optional: check  if applicable).

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

(Please provide at least 3 options in order of preference)

1. Title/ Job Industry:

2. Title/ Job Industry:

3. Title/ Job Industry:

## Future goals after completing the diploma program

## Experience you have related to Co-op placement

## Proficiency in any computer software application

**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