

APPLICANT: PLEASE KEEP THIS PAGE FOR YOUR RECORDS

Early Childhood Education (ECE) Dual Credit Pathway Objectives

This Pathway enables students to earn both secondary school graduation credits and post-secondary credit and/or credentials which may be transferrable to additional post-secondary studies and/or credentials.

Pathway Summary

Duration: Two evenings per week, September to April of Grade 12 (UFV Fall and Winter semesters)

Prior to Start of Pathway Successful completion of

- all Grade 10 and Grade 11 graduation-required courses; recommend 70% or higher in all academic courses including English Language Arts 11 and Math 11
- enrolled in English Language Arts 12 no later than September of Grade 12; must complete ELA 12 with minimum of 67% final mark

Location*: UFV Abbotsford – King Road; Yale Secondary (Abbotsford); Langley School Board Office

Transportation*: Responsibility of student

Equipment & Textbook costs*: Approximately \$300

***Subject to change**

Application Requirements:

- I am registered at a secondary school in Abbotsford School District
- I will be under 19 at the start of this program
- I am aware of the details of the program I am applying for, including:
 - costs for any equipment or textbooks
 - location of program and transportation arrangements
 - length of program and days/times program runs
- I have completed all sections of this application to the best of my knowledge, including parent signatures
- I have provided contact information for my School Recommendation, Teacher Reference, and Community Reference, and informed my references of that I am applying to this pathway
- I have attached to this application my most recent report card and/or current course marks
- I have submitted my complete application to my school's Career Facilitator, OR to the District Career Program Office (2606 Alliance St.)
- I understand that if my application is incomplete, it may result in a delay in processing or may be rejected
- I understand that once my application is processed, I will be contacted about the next steps, and if I am a qualified candidate, I will be invited to participate in an interview process
- If I am accepted for this pathway, I understand I must attend a **mandatory** orientation with a parent

Early Childhood Education Pathway Application



Full Name (please print clearly) _____

Current Grade & School _____

Please Specify Intended Start Date _____

For Office Use Only:

Early Childhood Education (ECE) Dual Credit Pathway Objectives

This Pathway enables students to earn both secondary school graduation credits and post-secondary credit and/or credentials which may be transferrable to additional post-secondary studies and/or credentials.

Student and Parent/Guardian Commitment

- The student is registered at a secondary school in Abbotsford School District
- The student will be under 19 at the start of this program
- The student & parent/guardian are aware of the details of the program including:
 - costs for any equipment or textbooks
 - location of program and transportation arrangements
 - length of program and days/times program runs
- ALL** sections of this application are complete **including** parent/guardian signatures
- The student's most recent report card and/or current course marks are attached to this application
- The student & parent/guardian understand that once this application is processed, the student will be contacted about the next steps, and if the student is a qualified candidate, they will be invited to an interview process
- If the student is accepted to this pathway, the student and parent/guardian must attend a **mandatory** orientation prior to the start of classes

I, _____ do hereby declare that I will:
(print student full name)

- Adhere to the School District Code of Conduct
- Attend all courses and maintain passing grades in all courses at both secondary and university
- Adhere to the Academic Code of Conduct required by the University of the Fraser Valley

I am aware that this pathway is a challenging opportunity and am willing to abide by the rules set forth by the Abbotsford School District and associated post-secondary institution.

Student Signature

Date

I, _____ do hereby declare that I have read all sections of this
(print parent/guardian full name)

this application package with my student, that I have completed all required sections, and that I understand and support the commitment my student is making to this pathway if they are accepted.

Parent/Guardian Signature

Date

District Career Programs - Registration



APPLICANT INFORMATION *(please complete ALL sections, and print clearly in ink)*

Legal Last Name _____ Legal First Name _____

Usual Last Name _____ Preferred First Name _____

Birth Date (Day/Month/Year) _____ School & Year of Grad _____

Street Address _____

City _____ Postal Code _____

Mailing address (if different from above) _____

The principal of a school may request a properly sworn Statutory Declaration from the enrolling parent or legal guardian attesting that the student's principal place of residence is the place indicated in this application. Applicants should note that making a false statutory declaration may constitute the criminal offence of perjury, contrary to Section 131 of the Canadian Criminal Code.

Preferred Phone _____ Preferred Email _____

Gender Male Female Non-Binary

Preferred Pronoun he/him she/her they/them Another pronoun _____

(Optional) Do you identify yourself as an Indigenous person? Yes No

If **yes**, are you: First Nations Métis Inuit

CITIZENSHIP STATUS

Canadian Citizen or Permanent Resident International Student

Parent/Guardian on Work Permit

MEDICAL INFORMATION

Dr Name _____ Phone _____

Care Card Number _____

Allergies and/or Conditions _____

Life Threatening? Yes No If **YES**, which? _____

If **YES**, Treatment _____

(AP 327 – Medical Alert Conditions, AP328 – Administration of Medication to Students, and AP 330 – Allergic Shock (Anaphylaxis). Copies are available at the school office or on the District website).

LEARNING SUPPORT INFORMATION: This information is used to ensure appropriate supports are in place for student success and does not impact student eligibility for a pathway or program. Describe any special learning needs or circumstances the Career Programs coordinator and/or post-secondary institution should be aware of or that might affect student success (for example, learning disability, mental or chronic health, etc.)

To help us meet student needs, please attach current documentation/assessment information to the application.

PARENT/GUARDIAN INFORMATION

Primary Contact - Relationship to applicant _____

Last Name _____ First Name _____

Address (if different than applicant) _____

Preferred Phone _____ Preferred Email _____

Second Contact - Relationship to applicant _____

Last Name _____ First Name _____

Address (if different than applicant) _____

Preferred Phone _____ Preferred Email _____

Are there any legal documents in force regarding custody/guardianship/access? Yes No

If **YES**, have you provided a copy of these legal documents to the home school? Yes No

STUDENT INFORMATION RELEASE – PARENT/GUARDIAN MUST COMPLETE & SIGN FOR EACH ITEM TO AUTHORIZE DISCLOSURE AS DESCRIBED:

In accordance with the Freedom of Information and Protections of Privacy Act, Abbotsford School District requires consent to use personal information for purposes unrelated to educational programs.

I give my consent for release of my name, address, email, and phone number to school district personnel to enable them to contact me regarding school issues, meetings, or school related activities.

Parent/Guardian Signature _____

Date _____

STUDENT IMAGES

Your child’s photograph may be used for administrative and identification purposes consistent with providing an educational program. In addition, your child’s name, photograph, and comments may be published in the school yearbook, school newsletter or brochure, school video or in a district annual report, calendar, or website.

I consent to the use of my child’s name, photograph, and comments for purposes consistent with the above.

I DO NOT consent to the use of my child’s name, photograph, and comments for purposes consistent with the above.

Parent/Guardian Signature _____

Date _____

Students cannot be photographed in classrooms or in school yards during school hours without student or parental consent. However, at various times throughout the school year, the school may invite spectators – including parents or media – to certain school events (school play, concert, sporting event, special classroom activities).

I consent to the publication of my child’s name, photograph, and comments in the news media for purposes consistent with the above.

I DO NOT consent to the publication of my child’s name, photograph, and comments in the news media for purposes consistent with the above.

Parent/Guardian Signature _____

Date _____

CONTACT INFORMATION FOR REFERNCES (Teacher, School Recommendation, Community)

Teacher Reference: this is a teacher (academic or elective) who has taught you in high school and can comment on your ability to be successful in this pathway (attendance, work habits, communications skills etc.)

First & Last Name, e-mail: _____

School Counsellor (or Administrator): they will provide a recommendation for your suitability for this pathway based on factors such as your graduation status and conduct/behaviour

First & Last Name, e-mail: _____

Community Reference: this is someone you know outside of school (for example a coach or work/volunteer supervisor) and can speak to your ability to be successful in this pathway (communication skills, commitment)

First & Last Name, e-mail: _____

Please ensure these people are aware they will be contacted by email for a reference for your application.

CAREER FACILITATOR RECOMMENDATION

To be completed by Career Facilitator:

	Excellent	Good	Satisfactory	N/A
Student's demonstrated skills & abilities for this program				
Student's readiness and aptitude for this program				
Student's understanding of the pathway, its purpose, the application process and implications for graduation				

Other comments: _____

- Student is aware of the details of the program including:
 - costs for any equipment or textbooks
 - location of program and transportation arrangements
 - length of program and days/times program runs
- Student has completed all sections of this application including parent signatures
- Student has provided contact information for School Recommendation, Teacher Reference, and Community Reference, and informed those references of their application
- Student has attached their most recent report card and/or current course marks

Recommendation completed by:

Name: _____ Signature: _____

Date: _____

Early Childhood Education Pathway Transition Plan and Statement of Intent



Application to this program is a competitive process. Please give complete, detailed answers using BLACK or BLUE pen, OR word processed. Please attach an additional page if you need more space.

First & Last Name: _____

School and Year of Graduation: _____

1. Indicate your plans for immediately following completion of this pathway (select all that apply):

I intend to apply to a university college program (indicate intended program & institution):

I intend to enter the workforce full-time or part-time (indicate intended employer/position):

Other (briefly explain):

2. Explain your medium-term (2-5 years) and long-term (5-10 years) career plans and goals, and how this pathway supports those goals:

3. Explain your interest in Early Childhood Education (ECE), and what knowledge you have of this career field:

4. Explain what your strengths are as a student and as a person:

- 5. Explain why you feel suited to work with young children, and what one thing would you most want to give to children:

- 6. Explain what you find most challenging when working with young children:

- 7. Explain how you have prepared (or will prepare) for post-secondary studies:

- 8. What will you do to ensure your success in this pathway? Speak specifically to attendance, work habits, academic achievement, and supports you can access if you are struggling with any aspect of this program:

- 9. What are your interests outside of school (for example, hobbies, sports, volunteering, etc.):
