# Application for Student Placement

## Please complete all sections

|  |  |  |  |
| --- | --- | --- | --- |
| Student’s name |  | Date |  |
| Student’s address |  | Phone |  |
| Student’s email address |  | Postal Code |  |
| Emergency contact |  | Phone |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Section 1: School Contact** | | | | |
| |  |  |  |  | | --- | --- | --- | --- | | School’s Placement Coordinator |  | | | | Placement Coordinator’s email |  | Phone |  | | | | | |
| **Section 2: Placement Details** | | | | |
| |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | |  | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday | | Morning |  |  |  |  |  |  |  | | Afternoon |  |  |  |  |  |  |  | | Evening |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Name of school |  | Name of Program |  | Year in the Program |  | | Length of placement (month to month) |  | Start date |  | End date |  | | Total placement hours |  | Number of hours per day |  | Days per week |  | | During placement, you will rely on:  Public transportation, or  Your own transportation | | | | | | | Preferred city to conduct placement in: | | | | | | | How did you hear about Christian Horizons? | | | | | | | | | | |
| **Section 3: Other Information** | | | | |
| What is the reason for your interest in volunteering with Christian Horizons? | | | | |
| Will you be able to provide two professional references?  Yes  No  *We require 2 professional references - we provide the forms. This can be work related, from a volunteer position, or from a professor/teacher/community leader. References cannot be from a friend or family member.* | | | | |
| Will you be able to provide a Vulnerable Sector Search Police Check?  Yes  No  Students are required to provide proof of full COVID-19 vaccination. Are you able to meet this requirement?  Yes  No | | | | |
| **Section 4: Applicant’s Certification (please read before signing)** | | | | |
| *As part of our responsibility to the people we support, we screen all of our applicants therefore position is dependent on successful screening processes and availability.*  *I certify that the information I have provided in this application is correct and complete.* | | | | |
| Applicant Signature | |  | Date |  |

**Thank you for your interest in conducting your student placement with Christian Horizons!**

**DISTRIBUTION: Forward completed document to:**

1. Coordinator of Volunteers & Student Placements