Youth Apprenticeship Contract

Saskatchewan Apprenticeship and Trade Certification Commission

2140 Hamilton Street
Regina, Saskatchewan S4P 2E3
Fax: (306) 798-5050
Email: youthapprenticeship@gov.sk.ca

This contract made between

Youth Apprentice's Last Name _____ Given Name(s) _____

hereinafter called "Youth Apprentice"

Currently of

Address _____ City/Town _____ Postal Code _____

Birth date (DD/MM/YY) _____ Telephone Number _____

- and -

School Year _____ School Name _____ School ID Number _____ School Division _____

School Address _____ City/Town _____ Postal Code _____

Gender: ☐ Female ☐ Male

Saskatchewan Student ID Number **(required from high school official)** _____

1. **In this Contract**:
   (a) "Commission" means the Saskatchewan Apprenticeship and Trade Certification Commission;

2. **The High School agrees**:
   (a) to follow the policies and procedures established for the Commission's Saskatchewan Youth Apprenticeship Program.

3. **The Youth Apprentice agrees:**
   (a) to meet the expectations of the school in the area of attendance, conduct and deportment; and
   (b) to follow the policies and procedures contained in the Commission's Saskatchewan Youth Apprenticeship Program.
   (c) to allow the Commission to disclose information respecting my participation in the Youth Apprenticeship Program for the purposes of providing verification of my certification; determining my eligibility for apprenticeship and certification programs in other jurisdictions; assisting inter-provincial labour mobility; program planning and labour market research.

Dated at _____, Saskatchewan this _____ day of _____, 20 _____.

Signature of Youth Apprentice _____ Signature of High School Official _____

Print Name of the Youth Apprentice _____ Print Name of High School Official _____

The following information is voluntary.

Aboriginal Ancestry: Please check the appropriate category:

☐ Treaty/Registered Indian ☐ Non-Status Indian ☐ Métis ☐ Inuit

Visible Minority: For the purpose of equity programs, visible minority persons are "persons, other than Aboriginal people, who are people of colour". For example, African, Chinese, Korean, or other racial background. Do you consider yourself to be a visible minority person?

☐ Yes ☐ No

Disability: Is a persistent and severe disability which limits employment activities. Do you consider yourself to have a disability?

☐ Yes ☐ No

For additional information on the skilled trades visit www.saskapprenticeship.ca