Job-Out Application Form

Cambrian College

Use this form if you are employed in a role relevant to the field of study where there is significant overlap with your WIL (Placement) Course Learning Outcomes and competencies. **Please complete Sections A, B, C and D and upload the completed form to your workflow in the myCareer portal.**

Note: This form is to be submitted a minimum of four weeks prior to the WIL placement block.

Section A: Personal information

Student name (Last Name, First Name)	Student number
Email	Program code

Section B: course information

Subject (name/code)	Program Coordinator

Section C: Employer information

Company name

Placement supervisor (Last Name, First Name)	Supervisor's position/title

Supervisor's phone number	Supervisor's email

Co-op/placement address	City	Province	Postal code

Section D: Job-out terms

Start date (dd/mm/yyyy) / /	End date (dd/mm/yyyy) / /	Number of hours per week

Position title	Description

Duties

Please attach a copy of the employment offer or letter from the employer.

Student signature

I understand that I am responsible for the accuracy of the above information.

Student signature	Date (dd/mm/yyyy) / /

Section E : Approval

I have reviewed the job-out request and ○ approve ○ deny the student's request.

Rational for denial:

Program coordinator	Date / /

This form shall be maintained in the Dean's Office along with a signed copy of the Job-Out Placement Agreement where applicable.