

Training for a Semiskilled Trade Program Referral Form

School Board: School Name:		
Student's Family Name: Permanent Code: Address:	First Name:	
Postal Code: Date of Birth: / / (YYYY/MM/DD	Student <u>must</u> be 15 years of age before Sept 30 th of the	year of enrollment.)
Semiskilled Trade Program	lic Profile : Students eligible for the one-year Tare currently performing at (or prepared to beginglish Language Arts and Mathematics. Copies ferral Form:	in instruction at) a
IEP		
End of Cycle Three	Elementary Report Card	
Most Recent High	School Report Card	
Student's Difficulty Code,	if any:	
Has a placement in the Trair student and his/her parents/ Yes	ning for a Semiskilled Trade Program been dis guardians? No	cussed with the
What are some of the studer	nt's interests and strengths?	
	workplace health and safety concerns to be citicum placements, which are a compulsory cer	
Referring Teacher, Principal	or Professional:	
Principal's Signature:		
		YYYY/MM/DD