



Human Resources Division
 125 Syndicate Ave S, Suite 42
 P.O. Box 800
 Thunder Bay, ON P7E 6H8



Co-op Student Placement Application Form

How to Register: fax: 625-3585
 email: recruitment@thunderbay.ca

Date:

General Information	NAME		CO-OP AVAILABILITY	START TIME	END TIME	
	ADDRESS		CITY	POSTAL CODE		
	PHONE NUMBER		EMAIL			
	Home:					
	EMERGENCY CONTACT: NAME		RELATIONSHIP	PHONE NUMBER		
	DATE OF BIRTH (if under 18 years)					SCHOOL
	MM	DD	YY			
	CO-OP TEACHER'S NAME		PHONE NUMBER			
EMAIL		BEST TIME OF DAY TO CONTACT				

Previous Work / Volunteer Experience	ORGANIZATION	POSITION OR MAJOR RESPONSIBILITIES	DATES: START/FINISH	

Special Skills, Training, Certificates, Hobbies, Spare-time Activities

How did you find out about the Co-op Student Placement Program with the City of Thunder Bay?

City Website Friend
 Staff School Other: _____



From the placement opportunities listed on the website, please list your top 3 choices in order of preference:

1: _____

2: _____

3: _____

Consent and Authorization for Reference Check

Please list 3 references. (i.e. teacher, coach, employer, last place you volunteered - personal and professional references required)

NAME	RELATIONSHIP TO YOU	PHONE NUMBER

I authorize The Corporation of the City of Thunder Bay to contact the people and/or organizations listed for the purpose of obtaining reference information including information contained in my personnel file. I further authorize these people and/or organizations to disclose such information:

SIGNATURE OF APPLICANT

DATE

All students must submit a completed and signed Co-op Student Placement Application Form.

- *I give permission to use any photos taken during co-op student placement for promotional purposes.*
- *I understand & agree to comply with the roles & responsibilities of my co-op student placement.*

SIGNATURE OF APPLICANT

DATE

SIGNATURE OF PARENT (If applicant under 18 yrs.)

DATE

ONTARIO HUMAN RIGHTS CODE: *It is a contravention of the Human Rights Code of Ontario to discriminate on the basis of: race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, marital status, family status, disability, age, record of offences, gender identity or gender expression.*

A resume is not required, but if one is included with this application it must not include any references to any of the above characteristics. Personal information on this form is collected under the authority of the Ontario Municipal Act, and will be used to maintain a record of individuals involved in the co-op student programs. Questions about this collection of personal information should be directed to the Human Resources Division, 125 Syndicate Ave S, Suite 42, P.O. Box 800, Thunder Bay, ON P7E 6H8 or telephone: 625-2585.