Saskatchewan Apprenticeship and Trade Certification Commission

2140 Hamilton Street
REGINA SK S4P 2K7
Telephone: 306-787-2368
Email: youthapprenticeship@gov.sk.ca

Youth Apprenticeship Contract

Is SYA being taken as part of a non-high school, adult education program? ☐ Yes ☐ No

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

2. **The High School agrees**:

This contract made between

Youth Apprentice's Last Name _____ First Name _____ Middle Name(s) _____

hereinafter called "Youth Apprentice"

Currently of

Address _____ City/Town _____ Postal Code _____

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

Gender: ◯ Female ◯ Male

Email address _____

- and -

School Name (Where the majority of SYA will be completed) _____ Sub-program if applicable (i.e. TASCAP, HCAP, etc.) _____

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

3. **The Youth Apprentice agrees:**
   (a) to follow the policies and procedures established for the Commission's Saskatchewan Youth Apprenticeship Program.
   (b) to meet the expectations of the school in the area of attendance, conduct and deportment; and
   (c) to follow the policies and procedures contained in the Commission's Saskatchewan Youth Apprenticeship Program.
   (d) 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 School Official _____

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

The following information is voluntary.

Indigenous Ancestry: Please check the appropriate category:

☐ First Nations ☐ Métis ☐ Inuit

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

☐ Yes ☐ No

Disability: Do you have a diagnosed disability as defined in the Saskatchewan Human Rights Code? (e.g. learning disability, ADHD, intellectual disability, mental disorder, physical disability, epilepsy, paralysis, visual or hearing impairment, speech impairment)

☐ Yes ☐ No

Clear Form

Revised March 21, 2019