

# Energy Training Program

April 30 -August 24, 2018

## Student Information Form

Time sensitive document – File with Department of Energy by:

**April 13, 2018**

Send completed form to:

Energy Training Program for Students  
NS Department of Energy  
Joseph Howe Building 1690  
Hollis Street PO Box 2664  
Halifax, NS B3J 3P7

Or email to:

Leanne.Tremblay@novascotia.ca

Graduates only:

Must submit a copy of diploma or certificate with this form.

### Organization & Position Information

Name of Business		
Job Title	Hourly Wage	Hours Per Week (Max. 40)
First Day of Work (Month/Day/Year)	Anticipated Last Day of Work (Month/Day/Year)	
Business Telephone	Business Fax	

### Student Information

Suffix	Last Name	First Name	Middle Initial(s)
Mailing Address (Street, Apt#, City, Province, Postal Code)			
Home Phone #	SIN #	Email Address	

### Academic Information

Academic Institution	Course of Study	
Student Number	Current Year of Study	Work Term (Specify: 1 <sup>st</sup> , 2 <sup>nd</sup> ...)

**To be completed by education institution approved by co-op coordinator:**

Please indicate if the above-noted student is on a work term for credit: Yes \_\_\_ No \_\_\_

Co-op Coordinator Signature: \_\_\_\_\_

Date: \_\_\_\_\_

I certify that the above information is complete and correct to the best of my knowledge, and I GIVE PERMISSION to my employer to send a copy of my Record of Employment to the Nova Scotia Department of Energy upon my termination.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_