

Student ID (9-digit)		Name	
(* a.g.,)			
Education			
Title of Post-Secondary Degr	ee/Diploma		
Otant Data (MANA (MOMA))		Data Oananlata	- 1/Ft 1 (MM (0000))
Start Date (MM/YYYY)		Date Complete	ed/Expected (MM/YYYY)
University/College Attended	'		
City	Prov/State		Country
Name of the program			
Scholarships, awards, Dean's	List, etc.		
High School Diploma Comple	ted		
Start Date (MM/YYYY)		Date Complete	ed/Expected (MM/YYYY)
Lligh Cohool Attended			
High School Attended			

Supervised Placements, Co-ops or Practicum

Start Date (MM/YYYY)	Date Completed/Expected (MM/YYYY)	Number of hours per week:
Start Date (MINI/ 1 1 1 1)	Date Completed/Expected (MINI/YYYY)	Number of flours per week.
Please provide a brief descriptio	n of activities	
Type of Placement (i.e. High sch	ool co-op, SSW Diploma practicum, e	tc.)
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Name of supervising educationa	ıl institution (i.e. Merivale High School	, Algonquin College, etc)
Start Date (MM/YYYY)	Date Completed/Expected (MM/YYYY)	Number of hours per week:
Please provide a brief descriptio	n of activities	
Todos provido a silor decemplio	n or delivities	
ype of Placement (i.e. High sch	ool co-op, SSW Diploma practicum, e	tc.)
Name of supervising educationa	ıl institution (i.e. Merivale High School	, Algonquin College, etc)
Start Date (MM/YYYY)	Date Completed/Expected (MM/YYYY)	Number of hours per week:
Please provide a brief descriptio	n of activities	

Certificates, Licenses and Trainings (e.g. ASIST, Smart Serve, etc.)

Name of certificate/license/training (a	and name of institute, if relevant)
Start Date (MM/YYYY)	Date Completed/Expected (MM/YYYY)
Name of certificate/license/training (a	and name of institute, if relevant)
Start Date (MM/YYYY)	Date Completed/Expected (MM/YYYY)
Name of certificate/license/training (a	and name of institute, if relevant)
Start Date (MM/YYYY)	Date Completed/Expected (MM/YYYY)

Paid Work Experience

List all in reverse chronological order, most recent first and work backwards. Indicate if work was part-time, less than 25 hours per week — or full-time, more than 25 hours per week, and reflect time period clearly with month and date (i.e. Sept 2021 to Feb 2022).

	To Date (MM/YYYY)	Part-time	Full-time (
Name of organization/employ	er		
City	Prov/State	Country	
	tion of activities (i.e., Telephone on of retail staff, serving tables and		
Start Date (MM/YYYY) Name of organization/employ	To Date (MM/YYYY) er	Part-time	Full-time (
City	Prov/State	Country	
Please provide a brief descript	tion of activities (i.e. Telephone o	or retail sales landscaning	lahour
	tion of activities (i.e., Telephone on of retail staff, serving tables and		
		d bar, general administrativ	
customer support, supervision	To Date (MM/YYYY)	d bar, general administrativ	ve duties e
customer support, supervision Start Date (MM/YYYY)	To Date (MM/YYYY)	d bar, general administrativ	re duties e
Start Date (MM/YYYY) Name of organization/employ City Please provide a brief descript	To Date (MM/YYYY) er	Part-time Country or retail sales, landscaping	Full-time (

Unpaid/Volunteer Work Experience

Start Date (MM/YYYY)	To Date (MM/YYYY)	
City	Prov/State Prov/State Full-t	-time (
	ties (i.e., Telephone outreach to potential voters, facilitated recre greeter, supervised outings, fundraising, event promotion, etc.)	
Title of your role	Name of organization/employer	
Start Date (MM/YYYY)	To Date (MM/YYYY) Part-time Full-t	-time (
	Prov/State Country ties (i.e., Telephone outreach to potential voters, facilitated recre greeter, supervised outings, fundraising, event promotion, etc.)	
Brief description of your activities, provided childcare,	ties (i.e., Telephone outreach to potential voters, facilitated recregreeter, supervised outings, fundraising, event promotion, etc.)	
Brief description of your activ	ties (i.e., Telephone outreach to potential voters, facilitated recre	
Brief description of your active activities, provided childcare, Title of your role Start Date (MM/YYYY)	Name of organization/employer To Date (MM/YYYY) Part-time Full-t	
Brief description of your active activities, provided childcare, Title of your role	ties (i.e., Telephone outreach to potential voters, facilitated recregreeter, supervised outings, fundraising, event promotion, etc.) Name of organization/employer To Date (MM/YYYY)	
Brief description of your active activities, provided childcare, Title of your role Start Date (MM/YYYY) City Brief description of your active	Name of organization/employer To Date (MM/YYYY) Part-time Full-t	-time (
Brief description of your active activities, provided childcare, Title of your role Start Date (MM/YYYY) City Brief description of your active	ties (i.e., Telephone outreach to potential voters, facilitated recregreeter, supervised outings, fundraising, event promotion, etc.) Name of organization/employer To Date (MM/YYYY) Part-time Full-t Prov/State Country ties (i.e., Telephone outreach to potential voters, facilitated recre	-time (

Other Community or School Involvement

Group or Committee (i.e. 2SLGI	BTQ2IA+ student society, Youth outreach program, etc.)
Start Date (MM/YYYY)	To Date (MM/YYYY)
Title of your role (i.e., Member,	vice-president, student ambassador, team captain, participant)
Craup or Committee (i.e. OCI CI	BTQ2IA+ student society, Youth outreach program, etc.)