



Program Summary:

Hairstylist: Chilliwack Secondary – Semester 2 (Grade 11), Semester 1 (Grade 12)

Transportation: Students are responsible for their own transportation to CSS

Equipment, Textbooks & Other Fees: approximately \$500 for salon tool kit (Student Responsibility)

Certification Received: Skilled Trades BC Foundation Level 1

Daily Class Schedule: Monday – Thursday 10am - 5pm

Youth TRAIN in Trades Program Objectives:

Skilled Trades BC Youth TRAIN in Trades is an industry certification program for BC secondary school students. The program enables students to earn both graduation credits and credit for the first level of technical training associated with a *Skilled Trades BC* program or apprenticeship. Through Practicum placements, students can also earn credit toward the on-the-job component of a *Skilled Trades BC* program. This is an opportunity for high school students to get a head start on earning their credentials in a trade recognized by *Skilled Trades BC*.



Topics Covered in the Hairstylist Program:

- Introduction to the Cosmetology industry
- Design Principles
- Hair Cutting & Styling
- Salon Ecology
- First Aid
- Trichology
- Personal & Public Hygiene
- Bacteriology & Infection Control
- Client Relations
- Hair Colouring & Highlighting
- Chemical Texturizing
- Anatomy & Physiology
- Wigs & Hair Extensions
- Resume Design
- Employability Skills
- Skilled Trades BC Final Exam

Student Agreement: *By signing below, student and parent/guardian acknowledges an awareness of program requirements as outlined above, including associated costs.*

Student Name: _____ **Signature:** _____

I give my child permission to participate in the SD#33 Youth TRAIN in Trades Hairstylist program.

Parent/Guardian Signature: _____

Application Requirements

Applicant: *keep this form for your records*

SKILLED
TRADES^{BC}

Applicants must meet the following requirements:

- Be fifteen years of age or older at start of the program
- Be nineteen years of age or under at the time of completion of the program
- Have not yet achieved Ministry of Education Graduation
- Be ready to register at Chilliwack Secondary school
- Parental sign-off of all pages

Note: Student is responsible for the cost of the Tool Kit ~ \$500.00

To learn more about the *Skilled Trades BC* Hairstylist Training and Certification Standards, scan or click on the QR code:



- Submit **completed** Chilliwack School District Career Programs application package (requires both student and parent signatures)
- Prepare a current resume and cover letter
- Submit your Application, your Resume & Cover Letter ALL TOGETHER to your school Counsellor.**

Only complete application packages will be processed.



District Career Programs Application



Student Name: _____

Current Grade: _____

PLEASE SELECT YOUR CAREER PROGRAM

SKILLED TRADES BC YOUTH TRAIN IN TRADES

Automotive Service Technician

Hairstylist

Welding

WORK EXPERIENCE

WEX 12A

WEX 12B

SKILLED TRADES BC YOUTH WORK IN TRADES

Specify Trade: _____

REGIONAL CAREER PROGRAMS (RCP) - UFV

Specify Course Option:

TRADES SAMPLER PROGRAM

Specify School: _____

DUAL-CREDIT PROGRAM

Early Childhood Education

I, _____ do hereby declare that I will:

- Adhere to the School District Code of Conduct
- Adhere to the School Code of Conduct
- Be in attendance at all courses
- Maintain passing grades in all courses

I am aware that this Career Education Program is a challenging opportunity, and I am willing to abide to the rules set forth by the Chilliwack School District.

Student Signature

Parent/Guardian Signature

Date: _____

Date: _____

District Career Programs Application



Chilliwack
School District
CAREER EDUCATION

STUDENT INFORMATION

Legal Last Name: _____ Legal First Name: _____

Usual Last Name: _____ Preferred First Name: _____

Birth Date (Day/Month/Year): _____ Email: _____

Home Phone: _____ Cell Phone: _____

School: _____ Grade: _____

Street Address: _____

Apt. No.: _____ City: _____ Prov.: _____ Postal: _____

Are you an International Student? YES NO

Are you an ELL (English Language Learner)? YES NO

Do you have an IEP (Individual Education Plan)? YES NO

PARENT/GUARDIAN INFORMATION

Primary Contact

Relationship to student: _____

Last Name: _____ First Name: _____

Address (if different from student): _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Email: _____

Secondary Contact

Relationship to student: _____

Last Name: _____ First Name: _____

Address (if different from student): _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Email: _____

MEDICAL INFORMATION

Doctor Name: _____ Phone: _____

Care Card No.: _____

Allergies and/or conditions: _____

Are any of these life-threatening? YES NO If "YES", please specify: _____

Treatment: _____

District Career Programs Application



DRESS CODE

It is expected that students conform to District dress code guidelines, in addition to worksite-specific requirements (e.g. Trade-specific, professional office attire, uniform, personal protective equipment, etc.)

RELEASE OF STUDENT INFORMATION

In accordance with the Freedom of Information and Protections of Privacy Act, Chilliwack School District requires consent to use personal information for purposes unrelated to educational programs.

I will conform to the guidelines presented to me for appropriate attire while participating in any Chilliwack School District Career Education programs.

I give my consent for release of my name, address, email and phone number to School District personnel and/or community employers to contact me regarding Career Education activities, meeting or schedules.

Student Signature: _____

Date: _____

STUDENT IMAGES

Your child's photograph may be used for administrative and identification purposes consistent with providing an educational program. As such, your child's name, photograph and comments may be published in a District newsletter, brochure, video or website.

In addition, on occasion, Career Education activities may be featured by local news media as a means of information sharing or promotion. As such, your child's name, photograph and comments may be published in the newspaper, online or on social media channels.

I give my consent for use or publication of my child's name, photograph and comments for purposes consistent with the above.

Parent/Guardian Signature: _____

Date: _____

Statement of Interest and Intent



Chilliwack
School District
CAREER EDUCATION

Name: _____

Program: **Youth TRAIN in Trades Hairstylist**

Career Goal: _____

1. What have you done to prepare yourself for study in this area (i.e. course work, extra-curricular activities, reading, interviewing people, etc.?)

2. What have you done to prepare yourself for work in this area (i.e. volunteer work, work experience, job shadow, related job or transferrable job skills, interviewing people, etc.?)

3. What skills do you have that will help you be successful in this program?

4. What interests you about a career in this field?

5. What knowledge do you have of this career field? (i.e. opportunities for work, working conditions, wages, etc.?)

Statement of Interest and Intent



Chilliwack
School District
CAREER EDUCATION

6. What will you do to ensure your success in this program? Speak specifically to attendance, work habits, academic achievement and work experience.

7. What are your interests outside of school? (hobbies, sports, clubs, special talents, etc.)

8. Please explain any absences/lates you have this school year

Teacher Reference Form

(Academic or Program Elective Teacher)



CONFIDENTIAL - Please complete the reference and submit in a **sealed** envelope to secondary school counsellor.

Student: _____
Last Name First Name

Course you taught this student: _____ Grade: _____

This student has applied for a seat in the **Youth TRAIN in Trades Hairstylist** Program.

- The program this student is applying for is academically rigorous. The pace is very fast and the student must be self-motivated and able to directly apply what they are learning theory wise to practical work. The ability to think critically is essential to the student success.

Do you feel the student applying can meet these criteria?

YES POSSIBLY NO

- Could this student be counted on to represent the school district favorably in a college/university setting?

YES POSSIBLY NO

- Do you feel this student has a sincere interest in this District Partnership program?

YES POSSIBLY NO

4. Please help by providing frank comments about this student. This will aid in the selection of appropriate candidates for this program.

	Excellent	Good	Satisfactory	Needs Improvement
Maturity				
Accuracy/ability to follow instructions				
Enthusiasm and interest				
Adaptable – adjusts to new situations				
Follows through on assigned tasks				
Attendance				
Punctuality				
Shows motivation to learn new skills				
Can work independently				
Has positive attitude towards work				
Accepts constructive criticism				
Makes changes as a result of constructive criticism				

Evaluation completed by: _____ Phone #: _____

School: _____ Signature: _____

Transition Plan - Hairstylist



Chilliwack
School District
CAREER EDUCATION

Grade 10 - Completed Courses

Course	Marks

Grade 11/12 Plan - Must meet all grad requirements

Semester 1 Course Plan	Semester 2

HAIRSTYLIST
PROGRAM

Semester 1	Semester 2 Course Plan

HAIRSTYLIST
PROGRAM