

APPENDIX #1 - STUDENT APPLICATION FORM



PERSONAL INFORMATION	
Last Name:	First Name:
Address:	Phone Number:
Educational Program:	School:
Educational Liaison Contact (Name and Phone Number):	Email Address:
EDUCATION/TRAINING	
High School Grade:	College/University:
	Other (specify):
SKILLS	
If you speak any languages other than English, please list them:	
Do you hold a valid driver's license? Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]	
What skills do you have that would benefit the Vaughan Community Health Centre?	

STUDENT EXPERIENCE

Have you had previous experience in a student placement? Yes [] No []
If **yes**, please describe your experience:

AVAILABILITY

Duration of placement: From _____ to _____

Total required hours: _____ hours

Specified day of the week and hours per day:

- Monday _____
- Tuesday _____
- Wednesday _____
- Thursday _____
- Friday _____

COMMITMENT

Why have you chosen to do your student placement with us at the Vaughan Community Health Centre and what would you like to gain from this experience?

Do you have any other expectations regarding your placement?

Is there any other information you would like to provide?

APPLICATION PROCESS:

1. All students must submit the Application Form with their cover letter and resume.
2. Selected candidates will be invited to attend an interview. Candidates considered for an interview will be contacted by email. Please check your junk/spam folder regularly.
3. Upon completion of the interview, successful candidates will be contacted for reference check forms/letters or contacts.
4. An offer of student placement will be issued once references are complete. Offers may be conditional upon providing to the Vaughan Community Health Centre, at candidate's own expense, a Vulnerable Sector Check (less than 6 months old from the start date of placement); 2-Step TB tests and proof of immunity to preventable diseases; proof of Covid-19 vaccinations (2 doses).

Signature of Applicant:

Date:

Please send the required documents to the Student Coordinator:

Vaughan Community Health Centre
9401 Jane Street, Suite 206, Vaughan, Ontario • L6A 4H7
Phone: (905) 303-8490
Website: www.vaughanchc.com
E: info@vaughanchc.com

While applications are preferred via email, you are welcome to apply by mail or in person. Accommodation will be provided in accordance with the Ontario Human Rights Code. If you need accommodation during the acceptance process, please contact us at info@vaughanchc.com to provide your contact information. We thank all candidates in advance for their interest, however, only those selected for an interview will be contacted

Thank you for your interest in VCHC!