

Deadline for Employer Summer Job Applications is MARCH 15. Funding is not guaranteed

*each employer must also submit one updated Sponsor/Employer Information Form per year

Legal Name of Employer:					
Department:					
Department Director:					
Student Job Position Title:				Γ	
Name of Student:				OR	To be posted
Student Job Position Supervisor:					
Student Job Position Mentor(s):					
Job Duties:	attached &	emailed	OR	□ listed below	
For attached job descriptions an					
electronic copy <u>must</u> also be emailed					
summerstudent@ sagamok.ca					
OR					
List duties in the space provided					
Qualification		been a full time stud	ent in tl	ne previous academic	semester (for
Requirements:	 summer student jobs) Must provide proof that they will be a full time student in the immediately 				
	upcoming academic semester (for summer student jobs)				
	 Must provide proof of current full time student status (for student part time jobs) Must be a registered member of Sagamok Anishnawbek 				
	Preference	e will be given to stude	ents in t	he following fields	
	0	List fields of study:			
		, or be willing to obta			
	document o	ation requirements (ie		Aid, WHMIS, CPIC, Lice	ense, etc)
	0				
	• <u>Mandator</u> o	- , , , , ,		st – ie. Steel toe, non-	slip, safety vest, etc.):
	0				
	0				



Form Title: Student Job Application Form Policy Reference: ISETP Types of Programs 3.5 Page 2 of 2

Anticipated			
Start Date:			
Anticipated			
End Date:			
Duration			
(# of weeks):			
Rate of Pay for			
Position:			
Rate of Subsidy			
requested (see			
below)**:			
encouraged to contribute, information on wage subsid	ge for for-profit employers, and associated Mandatory Employer Related Costs (MERCs). Employers are where possible. Please see ISETP Policies located at <u>www.sagamokeducation.ca/isetp</u> for more detailed dy rate exceptions.		
Hours of Work:	The student will work for <u>#</u> hours per day, between the hours of <u>time</u> and <u>time</u> , from <u>day</u> to <u>day</u> , for a total of <u>#</u> hours per week.		
	The student (select one)		
	If will/may, the student will/may work on Saturday from <u>time</u> to <u>time</u> , and on Sunday from <u>time</u> to <u>time</u>		
Other Funding:	Have you Contacted any other funding agencies for assistance with this particular position?: Yes No If yes, which agencies:		
	What was/were the outcome(s)?:		
Interview:	My employer (select one)		

I hereby certify that the above information is true and correct to the best of my knowledge, that *I am authorized to* request and approve such applications on behalf of the above named company. I further declare that this position will not negatively affect employment status for current employees, that there are no potential conflicts of interest, the student will be selected through a fair process, and the student will not be supervised by an immediate family member. I agree to notify Sagamok Anishnawbek ISETP LDM should any information change in regards to this application.

Print Name: ______ Title: ______

Signature: _____ Date: _____

Please submit completed form to SAGAMOK DEVELOPMENT CORPORATION ISETP LDM by March 15

(or the immediately following business day if March 15 falls on a weekend) via

fax: (705) 865-1509 OR email: summerstudent@sagamok.ca

OR mail: P.O. Box 2230, Massey, ON, POP 2L0