

RAP Employer Booklet



Our Lady Mount Pleasant School

Kevin Elliott- Off Campus Coordinator
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Keivn Elliot - Off-Campus Education Coordinator

Our Lady of Mount Pleasant School

School: (780) 672-2975 Fax: (780) 672-4747

Email: kevin.elliott@eics.ab.ca

Dear Sir/Madam;

Thank you for becoming an integral part of our Off-Campus program at OLMP School. We appreciate your time and effort for the benefit of our students.

Please **keep for your records** the following documents:

- Employer Responsibilities
- Student/Employee Responsibilities
- Worksite Inspection Sheet

Please return to OLMP the following documents:

- RAP Evaluation of Student [**1 for every 75-125 hours**]
- Employer Program Evaluation [End of placement]

Should the student be injured on the worksite, please contact me immediately. Should the student miss work due to injury, please fill out a WBC Employer's report, however **leave the WCB account # blank.** I will fill this out when picking up any necessary documents.

Should any concerns with the student arise at any time, due to work habits or otherwise please contact me immediately. I would be happy to help – see my contact information at the top of each page.

Thank you again for helping OLMP students develop work experience skills. Your participation in our program is much appreciated!

Kind regards,

Kevin Elliot

OLMP School

REGISTERED APPRENTICESHIP PROGRAM (RAP)

WHAT IS RAP? INFORMATION FOR EMPLOYERS

OBJECTIVE

The purpose of the Registered Apprenticeship Program is to provide students with the opportunity to begin accumulating apprenticeship hours in a trade, while working toward their **High School Diploma**.

DESCRIPTION

Students complete **125 hours for 5 credits** on a trial basis called an internship (usually completed in July). Following this period, if the internship is successful for both parties, the employer will apprentice the student and employ them for August and one semester (September-January OR February-June) on a full-time basis (approximately 40 hours per week). Employers may apprentice the student on a part-time basis (every morning OR every afternoon) and the student will attend school on a part-time basis for the entire school year. For every 125 hours worked, students earn 5 credits, to a maximum of 40 credits. Apprenticeship hours are accumulated as usual, and reported by the employer.

WAGE

Employers' participation in the RAP Program should in no way affect their normal hiring practices and expectations.

WCB

Alberta Learning provides Workers' Compensation coverage for student workers.

HOURS OF WORK

Students may work between **7:00 A.M. and 10:00 P.M.** seven days a week (Monday to Sunday). Employers' exemption from minimum wage legislation and students' coverage by Workers' Compensation **apply only during these hours**.

AGREEMENT

Employers enter into an agreement with the student, the student's parents or guardians and Elk Island Catholic School Division, covering the period of employment. The employer, for reference, should retain one copy of the completed agreement (RAP Contract)

LEARNING PLAN

Student's duties should be discussed and agreed to by all parties. A Learning Plan will be discussed and defined noting student tasks and learning expectations.

SUPERVISION

The employer will directly supervise and control the work of the student during the work periods. The RAP coordinator will visit and/or contact the work site supervisor periodically for evaluation purposes.

ASSESSMENT

Employers are asked to complete an assessment of the student's performance, for every 125 hours worked. Assessments must be sent to the Off-Campus RAP Coordinator or returned A.S.A.P.

TRACKING HOURS


Students are required to deliver or fax their hours and progress to their RAP coordinator monthly, initialled or signed by their supervisor in accordance with Alberta Education. This is essential for accurate distribution of school credits at reporting periods. Employers are also asked to assist the student with the upkeep of his/her blue book on a regular basis.

Please contact Off-Campus RAP Coordinator for the following:

CONTACT

COORDINATOR

- ▶ Student accident – you will need to contact the RAP coordinator for the WCB number;
- ▶ Student incident – the coordinator is aware (may choose to speak to the student or the employer may);
- ▶ Student Problem (absence, initiative) – one which the school needs to be involved to resolve;
- ▶ Student disobeys or ignores company rules or regulations;
- ▶ Absence from work without having contacted the employer.

 **THANK YOU!** To you and your staff for the time and effort donated to this Program.



Responsibilities of the Off-Campus Education Student

To be eligible for an Off-Campus Education placement, the student must have completed the HCS 3000(Workplace Safety Systems) course and all registration documents. HCS 3010 (Workplace Safety Practices) and CTR 1010 (Job Preparation) are also recommended modules for Off-Campus Education. AG 3000 is the prerequisite for the Green Certificate Program.

1. The student should recognize this learning experience as an opportunity to establish his/her credibility as a good worker. Employment experience, an employer reference, and high school credits are the rewards of this program. RAP students will also register hours towards their apprenticeship program.
2. As expected in any employment situation, the student must notify their supervisor of an absence prior to **every** occurrence.
3. **If the courtesy of reporting an absence is neglected, the off-campus contract may be terminated.**
4. The student recognizes the need for adequate training for any equipment, tools or machinery for student/employee use. The student understands their “**Right of Refusal**” to any task considered unsafe or when the student feels ill prepared to undertake an assigned task.
5. The student will recognize and respect the **confidentiality** of the workstation. Matters that pertain only to the workstation and staff will not be discussed outside the workstation. Genuine concerns regarding the workstation will only be discussed with the Off-Campus Education Coordinator.
6. If the student encounters an accident or injury while at the workstation, it **must be reported immediately** to the supervisor and then to the Off-Campus Education Coordinator within 24 hours. If you must see a doctor for medical attention, please inform the doctor that it **may** be for a Workers Compensation claim.
7. The student accepts responsibility to maintain accurate and detailed “Time Sheets” or other Off-Campus Education documents as required.
8. The student accepts responsibility for transportation to and from the workstation.
9. Attendance and school work in other classes must not be affected by Off-Campus Education courses.

Off-Campus Education Responsibilities of the Employer /Workplace Supervisor

1. Provide an opportunity for the student to experience your hiring process and a “new employee orientation” informing the student of the performance expectations and safety regulations and protocols.
2. Provide adequate training for any equipment, tools or machinery that will be used by the student. Acknowledge the student’s “Right of Refusal” to any task the student considers unsafe or that he or she feels ill-prepared to undertake.
3. Provide supervision for the student, preferably a “job shadowing” situation until some basic routines are established.
4. Assist the students at the work site to do meaningful work according to their capabilities.
5. Ensure the worksite is “Occupational Health and Safety Act” compliant.
 - a) **The on-site instructor / supervisor shall be designated as the person who has primary responsibility for the students’ health and safety while they are at the work station or work site.**
6. **Follow the “Off Campus Injury Protocol” in reporting any accident or injury involving the student on the work site. Contact the Off-Campus Education Coordinator within 24 hours.**
7. Report any on-going attendance problem to the Off-Campus Education Coordinator. The student may work between **7:00 a.m.** and **10:00 p.m.** on days agreed upon by the student (Parent/Guardian if applicable) and the workstation supervisor.
8. Offer comments and sign the student’s time sheet on a monthly basis before it is turned into the Off-Campus Education Coordinator.
9. Provide an evaluation of the student’s work habits and job performance skills (final evaluations required).
10. Will your business pay?
 1. Regular wage_____
 2. Hourly rate_____
 3. Honorarium_____
 4. No Wage _____

 Employer / Workplace Supervisor
 (Please Print)

 Signature

 Date

We appreciate your support of the Off-Campus Education Program

RAP EMPLOYER RESPONSIBILITIES SUMMARY

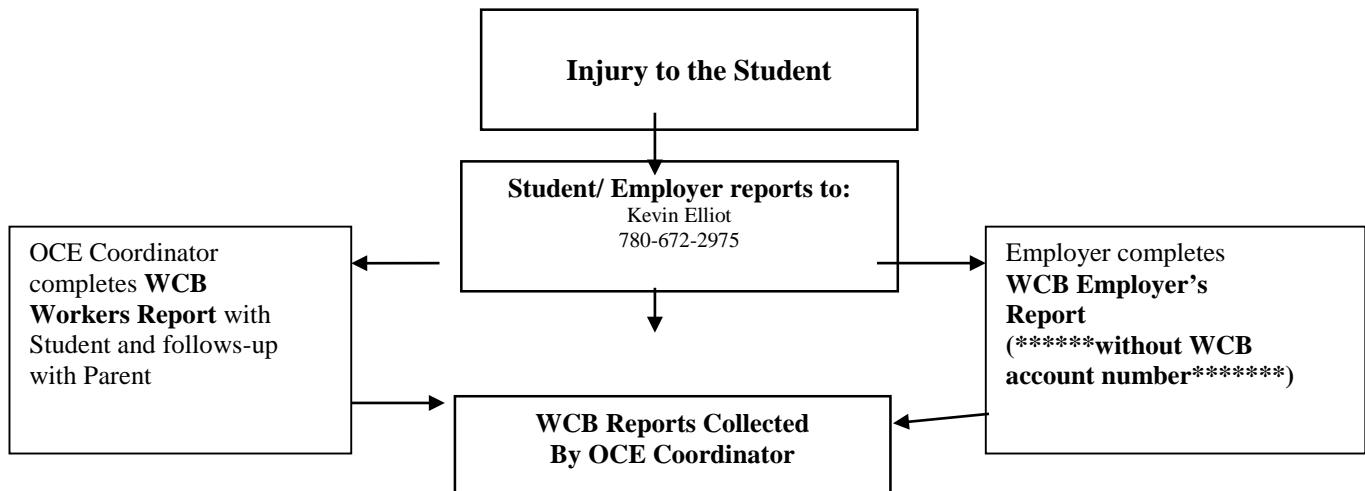
The employer shall:

- provide constant onsite supervision related to the RAP apprentice's safety and well-being
- provide the RAP apprentice with trade-specific, on-the-job training
- ***maintain the RAP apprentice's record book
- maintain contact with the off-campus coordinator to develop regular performance reports
- assess** the RAP apprentice on a monthly basis (back of timesheets)
- sign **monthly** timesheets
- give the RAP apprentice fair and equitable compensation.

Students must:

- Work safely and follow safety procedures outline by employer
- **Report all injuries immediately to the employer and off-campus coordinator**
- Attend all scheduled work time – if an absence is required, prior notice must be given to employer

Safety/Injuries– If the student is injured at work, follow the following steps:



OFF-CAMPUS EDUCATION (Done by School Work-Ex Coordinator) WORK SITE/WORK STATION INSPECTION CHECKLIST *Part 2*

All checklist questions must be acceptable prior to approving this work site.		Acceptable	Needs Improvement	Not Acceptable																								
1	Who will provide onsite supervision and job-related training for the student? Name/position of supervisor:																											
2	Will job-related health and safety training and orientation be provided to the student? Yes <input type="checkbox"/> No <input type="checkbox"/>																											
3	Is the student expected to wear any personal protective equipment (PPE)? <input type="checkbox"/> Yes <input type="checkbox"/> No <table style="width: 100%; border: none;"> <tr> <td></td> <td style="text-align: center;">Employer</td> <td style="text-align: center;">Student</td> </tr> <tr> <td>Hearing protection</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Eye protection</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Footwear</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Headwear</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Gloves</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Coveralls/uniform</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Other</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>		Employer	Student	Hearing protection	<input type="checkbox"/>	<input type="checkbox"/>	Eye protection	<input type="checkbox"/>	<input type="checkbox"/>	Footwear	<input type="checkbox"/>	<input type="checkbox"/>	Headwear	<input type="checkbox"/>	<input type="checkbox"/>	Gloves	<input type="checkbox"/>	<input type="checkbox"/>	Coveralls/uniform	<input type="checkbox"/>	<input type="checkbox"/>	Other	<input type="checkbox"/>	<input type="checkbox"/>			
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Other	<input type="checkbox"/>	<input type="checkbox"/>																										
4	Is the employer familiar with the process for reporting a student's injury? (Discuss with the employer that the student is an employee of Alberta Education for WCB coverage). Yes <input type="checkbox"/> No <input type="checkbox"/>																											
5	Are there emergency preparedness procedures in place: e.g., fire, spill? Yes <input type="checkbox"/> No <input type="checkbox"/>																											
6	Is a trained first aider available to the student at all times while the student is working? Yes <input type="checkbox"/> No <input type="checkbox"/>																											
7	Are fire extinguishers, first-aid kits maintained and readily available? Yes <input type="checkbox"/> No <input type="checkbox"/>																											
8	Are emergency exit/safety signs clearly visible? Yes <input type="checkbox"/> No <input type="checkbox"/>																											
9	Is emergency eyewash equipment (if necessary) maintained and readily available? Yes <input type="checkbox"/> No <input type="checkbox"/>																											
10	List the most critical potential hazards or dangers of this job; e.g. <input type="checkbox"/> Chemical – exposure to solvents, asbestos, dangerous gases (e.g., carbon monoxide) <input type="checkbox"/> Biological – exposure to moulds, parasites, blood and body fluids <input type="checkbox"/> Ergonomic – lifting heavy or awkward materials; repetitive work <input type="checkbox"/> Physical – manual lifting, exposure to noise, radiation, workplace violence, dangerous machinery, confined spaces <input type="checkbox"/> Psychological/cultural factors – stress, harassment, crude language, gender considerations (e.g., student is the only male/female at the work site). Have these hazards been identified and controlled by the employer? Yes <input type="checkbox"/> No <input type="checkbox"/>																											
11	How will the student be made aware of these hazards/dangers?																											
12	List the tools, materials and equipment the student will be expected to use or handle: <input type="checkbox"/> hand tools <input type="checkbox"/> heavy equipment <input type="checkbox"/> power lift equipment <input type="checkbox"/> vehicle operation <input type="checkbox"/> power tools <input type="checkbox"/> other hazardous machinery: _____ <input type="checkbox"/> other: _____																											
13	Does this work site appear to provide an orderly, well-maintained, safe and caring working and learning environment? Yes <input type="checkbox"/> No <input type="checkbox"/>																											

Between: Elk Island School district #41 (The "Division) and the undersigned "Employer", "Student", and "Parent/Legal Guardian."
 "Whereas the Student agrees to be employed and the Employer agrees to employ the Student as part of the "Off Campus Program" ("The Program"), the parties agree to be bound by the following terms and conditions of the Agreement".

Student's Name _____ Parent or Guardian Name _____
 Address _____ Student/Parent/Guardian Telephone (Home) _____
 City/Postal Code _____ Student/Parent/Guardian Telephone (Work) _____

School Our Lady of Mount Pleasant School Off-Campus Program _____ Hours _____
 School Contact Kevin Elliot Telephone 780-672-2975 Fax 780-672-4747

Name of Employer _____ Supervision Officer _____
 Company Address _____ Telephone _____ Fax _____

A. General Terms

1. This agreement shall be in force from _____ (Program Start Date) to _____ (Program End Date), unless terminated earlier in accordance with this Agreement.
2. Any Party may terminate this Agreement prior to completion by giving to the other party's notice of such termination. Such notice shall be effective on the date of delivery of such notice.
3. Protection from Liability: In consideration of the Division having arranged for the Program with the Employer, it is agreed by the Student and the Parent/Guardian that neither the Division nor the Employer shall be liable for any damage or injury or claim whatsoever arising out of the Program, employment provided hereunder by the Employer for the Student, or any act or omission of the Division or any other party to this Agreement. The undersigned Student and Parent/Guardian hereby release the Division, the employer, and their corporate affiliates, officers, directors, agents, and employees from any such liability.
 The undersigned Student and Parent/Guardian agree to indemnify and save harmless the Division and the Employer and its corporate affiliates with respect to any expenses, costs or liability whatsoever arising out of any damage or injury occurring in or in connection with employment provided hereunder for the Student.
4. Important Information: The Student is considered to be a "worker" of the Government of Alberta for purposes of Worker's Compensation while working under this agreement and the Division shall ensure that proper coverage is in place for the Student in this respect for the duration of the Program between 7:00 am and 10:00 pm. The hours of work for the Student and a Student Learning Plan shall be determined mutually by the Student, the Employer and the Off-Campus Coordinator at a time early in the program.

B. Student's Obligations

1. Work Diligently: The Student will diligently perform work for the Employer according to the Student Learning Plan.
2. Follow Rules: The Student agrees to follow the instructions of the Employer and obey all of the Employer's safety regulations and rules. The Student must also comply with any Division policies or rules applicable to the Program.

C. Employer's Obligations

1. Supervision: The Employer will directly supervise the work of the Student according to the Student Learning Plan during the work periods.
2. Access: The Employer will allow the Division representatives access to the employment site and Student at all times.
3. Safety: The Employer will ensure that the Student is provided with safe working conditions and is not exposed to any unreasonable or unlawful risk or dangers on the work site. The Employer confirms that the work site is in compliance with all applicable legislation, including but not limited to, the Employment Standards Code, the Labour Relations Code, the Occupational Health and Safety Act, the Labour Act (Canada), Workplace Hazardous Materials Information System guidelines, and local and provincial health, safety and building standards.
4. Assessment: The Employer will provide information relating to the Student's work performance and complete any related documentation provided by the Division for the purpose.
5. The Employer understands that the Student is inexperienced and that there is no warranty as to his or her qualifications.
6. Protection for Other Employees: The Employer will not allow the student's employment to affect the job security of any of its full-time employees or the availability of full-time employment for other persons.
7. Insurance: The Employer confirms that the student is covered in the same manner as other employees under valid general liability and automobile insurance policies.

D. Division Obligations

1. Approval of Program: Division staff is responsible for planning and approving the student's Off-Campus program including the specific knowledge skills and attitudes the student is to acquire based upon the learning plan.
2. Evaluation: Division staff will evaluate the knowledge, skills and attitudes the student acquires to determine if the awarding of credits will be recommended.
3. The Board maintains insurance with respect to its liability and that of the Student under this program. The Employer has the right to inspect the policy.

SIGNATURES

Employer _____ Student _____
 Teacher/Coordinator _____ Parent or Guardian of Student _____

Please Provide Copies: 1. – Division 2. – Employer 3. – Student & Parent / Guardian



Kevin Elliott: Off-Campus Education Coordinator
 School: (780) 672-2975
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 E-Mail: kevin.elliott@eics.ab.ca

MONTHLY HOURS SUMMARY REPORT

Student:	Month:	
Company:	Supervisor:	
Previous Hours:	Hours This Month:	Total Hours Accumulated:

Date	Time In	Time Out	Total Hours Today	Duties/Tasks/Activities Performed
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				Supervisor's Initial:
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				Supervisor's Initial:
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				Supervisor's Initial:

**Student Worker's Compensation coverage through the Government of Alberta applies only
 Between the hours of 7 a.m. & 10 p.m. (Monday to Friday)**

