

COOPERATIVE EDUCATION INCENTIVE (CEI)

STUDENT INFORMATION FORM

This form is to be completed by the student-employee.

Your co-op position is subsidized by the Province of Nova Scotia's Cooperative Education Incentive. The information requested below allows us to confirm that you are eligible for the program. We also require proof you are participating in a Co-op work term. **Provide a copy of your unofficial transcript or a letter from your Co-op Coordinator.**

We also require your personal contact information to complete program evaluation. We will send you a survey at the end of the work term. **You must complete this survey for your employer to receive payment.**

Details about how the program will protect your privacy are on the other side of this form. Sign both sides to provide your consent.

Name (please print):		Job Title:	
Organization Name:		Agreement #:	Co-op Position Wage:
Co-op Position Start and End Date:	Personal Phone Number:	Personal Email Address:	
Home Address: (Street Number / PO Box / City / Town / Province)		Postal Code:	
Social Insurance Number:	Date of Birth: ____/____/____ dd / mm / yr	Sex: <input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> Other <input type="checkbox"/> Prefer not to say	
Name of Educational Institution you are attending:		Program of Study:	
Student Number:	Start date at this Institution: ____/____/____ dd / mm / yr	Anticipated Date of Graduation: ____/____/____ dd / mm / yr	
<p>The CEI program provides a higher subsidy to employers who hire students who self-identify as a member of an equity-deserving group. Do you identify as any of the following:</p> <p> <input type="checkbox"/> Mi'kmaq or Indigenous <input type="checkbox"/> Female in under-represented occupation <input type="checkbox"/> Visible minority <input type="checkbox"/> 2SLGBTQIA+ <input type="checkbox"/> African Nova Scotian <input type="checkbox"/> Person with disability <input type="checkbox"/> International Student <input type="checkbox"/> None </p>			
<p>STUDENT SIGNATURE</p> <p>I hereby certify that, to the best of my knowledge, the provided information is true and accurate.</p> <p>-----</p> <p>Signature Date</p> <p><input type="checkbox"/> Review and sign the other side of the form.</p>			



Student Employment Programs
Cooperative Education Incentive
(Toll Free) 1-800-424-5418
(Local) 902-424-6000

COOPERATIVE EDUCATION INCENTIVE (CO-OP) *COLLECTION, USE, & DISCLOSURE OF PERSONAL INFORMATION*

Graduate to Opportunity, the Student Summer Skills Incentive, the Cooperative Education Incentive and other Nova Scotia government labour market programs are bound by the principles and requirements of the Nova Scotia Freedom of Information and Protection of Privacy (FOIPOP) Act.

The personal information that we collect will only be used for providing you with services: for registration to our programs or determining your eligibility for services, for instance, and for evaluating our programs, in keeping with the access and privacy provisions of the Nova Scotia FOIPOP Act and the Nova Scotia Personal Information International Disclosure Protection (PIIDA) Act.

We will only disclose your personal information to other organizations or individuals if it is required to fulfill the purpose(s) of the program (e.g. to coordinate with federal funding partners). Only required information, or information authorized by law will be disclosed.

Some functions within these programs or services are provided by organizations, such as an employer, that are external to the department of Labour, Skills and Immigration. All external organizations that provide you with a job using our programs, or with services on behalf of government, must comply with our privacy requirements and meet the applicable security, privacy and terms of use provisions.

Under the privacy provisions of the FOIPOP Act you have the right to correction of, and access to, your personal information. To obtain access or request a correction, please contact the Information Access and Privacy Services unit by email at IAPServices@novascotia.ca or phone (902) 424-2985 or 1-844-424-2985.

I acknowledge that I have read and understand the above information, and consent to the collection, use, and disclosure of my personal information.

Student Name

Student Signature

Agreement #