

IMPORTANT

**PLEASE COMPLETE THIS FORM AND SEND TO mbarker@redeemer.ab.ca
WHEN YOU REGISTER FOR SUMMER SCHOOL**

WORK EXPERIENCE EMPLOYER INFORMATION – To be completed and submitted to the email address above **at the same time** as registering for **Work Experience 15/25/35**

Name of Student _____

Grade _____

Address _____

Telephone Number _____

Email Address _____

Name of Employer _____

Address of Employer _____

Employer Telephone Number _____

Schedule _____

Supervisor's email _____

Description of Work _____

**PLEASE COMPLETE THE ONLINE REGISTRATION FORM BY
CLICKING THE REGISTER NOW BUTTON ON THE MAIN PAGE.**