

# School-College-Work Initiative

## **ATTESTATION OF TRAINING FACILITY FOR COLLEGE OVERSIGHT for Level 1 DUAL CREDIT PROGRAM 2020-21**

To be completed by College Training Delivery Agent (TDA)

I the undersigned, as the representative of \_\_\_\_\_ College, a  
Ministry of Labour, Training and Skills Development (MLTSD) authorized Training  
Delivery Agent for the trade of \_\_\_\_\_  
\_\_\_\_\_ (trade and trade code) do attest that  
\_\_\_\_\_ (name of school) has the appropriate  
facilities and equipment to conduct Level 1 Apprenticeship in-school training for the  
trade of \_\_\_\_\_  
\_\_\_\_\_ (trade and trade code) adhering to the  
learning outcomes set out in the Apprenticeship In-School Curriculum Standards, and  
that the teacher has the appropriate qualifications to deliver the program.

### **Participating High School Information:**

School Name:	
Address:	
City:	Postal Code:
Tel:	FAX:
School Contact Email:	

In addition, I confirm that the information provided by me on this form is accurate and true.

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Print Name & Title

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Representative Signature

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Date