

Workplace Safety and Insurance Board or Private Insurance Coverage for Students on Program-Related Unpaid Placements

Student coverage while on unpaid placement:

The Ontario Ministry of Advanced Education and Skills Development provides Workplace Safety and Insurance Board (WSIB) coverage for Student Trainees enrolled in an approved program at Carleton University and participating in unpaid work placements with employers who have WSIB coverage.

- The Ministry provides private insurance for Student Trainees and limited coverage for placements outside of Ontario (international or other Canadian jurisdictions).
- Carleton University has also arranged for private insurance coverage for students who attend placement opportunities that are not covered under either the WSIB or the Ministry's private insurance.
- Students are advised to maintain insurance for extended health care benefits through the CUSA/GSA Student Health & Dental Plan or other group or private personal insurance plan. (<http://carleton.ca/health/insurance/>)

Please be advised that in the event of a workplace injury or disease where a claim is being made, Carleton University will be required to disclose personal information relating to the unpaid work placement and any WSIB claim or claim made through the Ministry's private insurer.

Declaration and Agreement

I hereby declare that I have read and understand that WSIB or private insurance coverage will be provided through the Ministry or by Carleton University while I am on an unpaid placement.

I agree that, over the course of my placement, I will participate in, comply with all safety-related training and procedures provided by the Placement Employer.

I agree that I will promptly inform my Placement Employer of any safety concerns. If these concerns are not resolved, I will contact my Departmental Coordinator/Administrator at Carleton University and notify them of any unresolved safety concerns.

I agree and understand that all workplace accidents sustained while participating in an unpaid work placement must be immediately reported to the Placement Employer and Office of Risk Management at Carleton University at risk@carleton.ca

I also agree and understand that a Ministry [Post-Secondary Student Unpaid Work Placement Insurance Claim](#) form must be completed and signed in the event of any workplace injury and submitted to the Office of Risk Management at Carleton University at risk@carleton.ca

Student Declaration of Understanding and Agreement

In the event of an injury, I also agree to maintain regular contact with the Office of Risk Management at Carleton University at risk@carleton.ca and the departmental coordinator/administrator to provide all information relating to any restrictions and my ability to return to the placement.

I understand the implications and consequences of signing this agreement.

Student Name:				
Student ID Number:				Carleton Course Number (ex: CHEM1001A):
Visa Student:	<input type="checkbox"/> Yes	<input type="checkbox"/> Undergraduate	Degree/Department (ex: BA/Chemistry):	
	<input type="checkbox"/> No	<input type="checkbox"/> Graduate		
Name of Departmental Coordinator or Administrator:		Extension of Departmental Coordinator or Administrator:		
Estimated number of placement hours:		Organization (where placement occurs):		
Start Date:		End Date:		
Organization Contact:		Organization Contact Number:		
Name of Parent/Legal Guardian (students under 18):				
Signature of Parent/Legal Guardian (students under 18):				
Student Signature:				
Date:				

Distribution:

Carleton University Departmental Coordinators/Administrators: (Copies of this document to be provided to Office of Risk Management and kept by student's Academic Department with a copy sent to Registrar's Office, 300 Tory Building or registrar@carleton.ca to form part of the Official Student Record)

<i>Departmental Coordinators/Administrators: Sign and Date Upon Receipt:</i>
<i>Copy of Document (for student file) to Registrar's Office, 300 Tory Building or registrar@carleton.ca: Sign and Date Upon Receipt</i>
<i>Additional remarks:</i>

For any questions regarding this form, please contact the Office of Risk Management at Carleton University at risk@carleton.ca or 613-520-2600 x 4000.