Huron-Superior Catholic
DISTRICT SCHOOL BOARD

APPENDIX D

Letter Notifying An Employer Whether Or Not A Student Has Permission To Work

[date]

[name of employer]

[address]

Dear *[name of employer]*:

On *[date of SAL Committee meeting]*, the Supervised Alternative Learning (SAL) Committee of the *[name of district school board]* considered the request for *[name of student, date of birth] [to continue]* to participate in the SAL program in accordance with Ontario Regulation 374/10, "Supervised Alternative Learning and Other Excusals from Attendance at School"", made under the Education Act.

_____ The SAL Committee approved the request, and *[name of student]* is permitted to work during school hours as part of a Supervised Alternative Learning program. The following conditions apply:

- A visit by board staff will take place to confirm the safety of the proposed work and workplace (if it has not already taken place).
- Contact will be permitted between the primary contact *[insert name]* and the above-named student during work hours. The primary contact will arrange the contact time with you.
- You will inform the primary contact by telephone, at *[telephone number],* or by e-mail within five school days of the end of employment of the above-named student.

OR

_____ The SAL Committee did not approve the request, and the student is expected to return to regular school attendance immediately. Therefore, the student is not allowed to be employed during school hours.

Should you have any questions regarding this decision, please contact me directly, at *[telephone number].*

Yours truly,

Principal

cc: Primary contact