

**Student Declaration of Understanding**

**Workplace Safety and Insurance Board or Private Insurance Coverage**

**Unpaid Teacher Candidates in Field Placements** - **Student Coverage While on Placement**

OISE students engaged in field experiences are eligible for Workplace Safety Insurance Board (WSIB) coverage of claims while on unpaid placements as required by their program of study. Private insurance will be provided should the unpaid placement required by their program of study take place with an employer[[1]](#footnote-1) who is not covered by WSIB. For more detailed information, go to: <http://www.tcu.gov.on.ca/pepg/publications/placement.html>

Ministry of Training, Colleges and Universities ensures that students on work placements receive WSIB for placement employers who have WSIB coverage and private insurance for employers who are not covered by WSIB for injuries or disease incurred while fulfilling the requirements of their placement.

**Declaration**

1. I have read and understand that WSIB or private insurance coverage will be provided through the Ministry of Training, Colleges and Universities while I am on an unpaid placement as part of the OISE Master of Teaching program.
2. I agree that, over the course of my placements, I will participate in and implement all safety-related training and procedures obtained from the University and the Placement Employer/site. If requested by the University, I will provide written confirmation that I have received safety training.
3. I will promptly inform my Placement Employer of any safety concerns. If these concerns are not resolved, I will contact the University’s placement coordinator within my faculty and notify them of any unresolved safety concerns.
4. I understand that all accidents sustained while participating in an unpaid work placement must be immediately reported to the Placement Employer and my OISE MT Practicum Coordinator. A MTCU Postsecondary Student Unpaid Work Placement Workplace Insurance Claim form must be completed and signed in the event of injury and submitted to the MT Practicum Coordinator.
5. I consent to the release of my personal information relating to the placement to my Placement Employer and MTCU, including address, telephone number, date of birth and social insurance number.
6. In the event of an injury, I also agree to maintain regular contact with the University and to provide the University with information relating to any restrictions and my ability to return to the placement.
7. I understand the implications and have had any questions answered to my satisfaction.

**Student name** (print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Program/School**: Master of Teaching Program, OISE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Collection Notice Regarding Personal Information**

The University of Toronto protects your privacy and Personal Information. The Personal Information requested on this form is collected under the authority of the section 2(14) of the University of Toronto Act, 1971 in accordance with the Freedom of Information and Protection of Privacy Act (“FIPPA”). The information will be used to communicate with the Placement Employer – for example, to confirm eligibility for the Placement or in the event of a workplace accident. Direct any questions about this collection to the University Freedom of Information and Protection of Privacy Coordinator at (416) 946-7303 or visit the website at http://www.utoronto.ca/privacy.

Please give your completed form to your Class/Cohort Rep., who will deliver a class set of completed forms to Phillippa Pothemont, Rm. 11-104D.

This signed form is kept on file for the duration of a TC’s time in the MT program.

1. This is as WSIB term. It refers to the placement site and does not imply an employment relationship. [↑](#footnote-ref-1)