



SCHOOL VERIFICATION OF ENROLMENT FORM APPLICATION FOR 2025 STUDENT EMPLOYMENT

Name of Student: _____

TO BE COMPLETED BY STUDENT:

Students eligible for employment with SYNERGY NORTH must have been attending school on a full-time basis for the 2024/25 school year, and be returning to full-time studies for the 2025/26 school year.

To be considered for student employment I verify that I am registered / intend to return to **full-time** school studies at _____ in September 2025 and comply with the statement below: *Name of School*

Date: _____

Signature: _____

I hereby certify that the information set forth above is true and complete and I understand that omissions or false statements will be considered sufficient cause for rejection of the application, or discharge if hired. If employed by SYNERGY NORTH, I agree to be governed by all rules and regulations and agree to any conditions of employment in effect at the time of my employment and subsequent thereto. I agree to submit to a medical examination if requested as a condition of employment and at any other time that SYNERGY NORTH may request such an examination, and give permission to SYNERGY NORTH'S designated physician to obtain further medical information from my own physician.

VERIFICATION OF ENROLMENT:

You must also include a copy of Verification of Enrolment document from your school (University, College, High School)