



Personal Support Worker Application Form

2025-2026 School Year

DOWNLOAD AND SAVE THIS FORM TO YOUR COMPUTER WITH A NEW FILE NAME PRIOR TO COMPLETION.

- Contact your most recent school to obtain a copy of your High School Transcript
- Collect each of the following FOUR Proof of Identity documents:
 - 1 Proof of Citizenship
 - 1 Proof of Date of Birth
 - 2 Documents showing Proof of Ontario Residency
 - 1 Photo ID

Acceptable documents listed on last page

- Submit a current resume
- Pay the **\$300** non-refundable application fee on [School Cash Online](#)
- Complete the application package in FULL
- Email the completed application package, your transcript, and all Proof of Identity documents to:
psw@hdsb.ca

Once all documents are received, you will be contacted with more information.

Applications with missing or unclear documentation will not be processed.

Personal Support Worker Program

2025-2026 Application Form

PART 1: STUDENT & CONTACT INFORMATION

Legal Last Name:		Legal First Name:	_____
		OEN (if known):	_____
Date of Birth:		Cell Number:	_____
		Email Address:	_____
Gender:	Male Female	Self-Identify as:	_____
Name at Birth?	Yes No	If No, specify previous name:	_____
Country of Citizenship:	_____	Country of Birth:	_____
Date of Entry into Ontario:	_____ (MM/DD/YYYY)	Current CLB level:	_____ (if Eng. is not first language)
Address (Street):	_____		
City:	_____	Postal Code:	_____
Status in Canada (Select One)	Canadian Citizen Landed Immigrant (PR) Refugee Claimant Convention Refugee Other (Specify): _____		

PART 2: EMERGENCY & MEDICAL INFORMATION

Emergency Contact Name (First and Last): _____	
Relationship: _____	Phone Number: _____
Email: _____	
Medical Conditions:	_____ _____ _____
Allergies:	_____ _____ _____

PART 3: EDUCATIONAL HISTORY & PROGRAM DETAILS

Highest Grade Level Completed:	_____
Transcripts Attached?	Yes No
Interested in Grade 12 OSSD Diploma?	Yes No
Have you taken any courses in a related field?	_____ _____ _____
Specific learning difficulties and/or problems with the English language?	_____ _____ _____

PART 4: WORK EXPERIENCE

Resume attached?	Yes No
Do you work in the field (PSW)?	Yes No
Do you work or volunteer in a similar field?	Yes No



Most Recent Employment:	
Employer: _____	Type of Work: _____
Supervisor/Phone: _____	How long?: _____
Employer: _____	Type of Work: _____
Supervisor/Phone: _____	How long?: _____

PART 5: PSW PROGRAM-SPECIFIC QUESTIONS

1. Capable of meeting physical demands (bending, lifting)? Yes No Not Sure
2. Capable of meeting emotional demands (compassionate, punctual, honest)? Yes No Not Sure
3. Travel to clinical placement: By car By bus Walking
4. Are you willing to provide a vulnerable sector screening check? Yes No

Open Response Questions:

6. What personal qualities do you have that would make you a good PSW?

7. Concerns about childcare, early morning transportation, family responsibilities, and/or current jobs that might interfere with your ability to complete the program?

8. What does professionalism mean to you?

9. Please describe how you deal with conflict.



Personal Reflection:

- Describe a situation in which you helped another person. (Briefly explain how you helped and how you felt about your role as an assistant.)

- What is your career goal?

- What is it about that career that is attractive to you?

AUTHORIZATION

I certify that the information on this form is correct and I give permission for the disclosure and transmittal of information for administrative purposes.

Signature of Student (Type Full Name): _____ **Date:** _____

Please submit completed applications to: psw@hdsb.ca

Complete this Check list before submitting your application.

In order to apply for the PSW program, the following documentation must be submitted at time of application: Proof of Citizenship, Proof of Date of Birth, and Proof of Ontario Residency, Photo ID, Transcript and a Resume

Please indicate which form of Proof of Citizenship you have attached.		
Select <u>ONE</u> of the following:		
Birth Certificate	Immigration Papers	Permanent Resident Card
Passport	Canadian Citizenship Documents	Refugee Documents

Please indicate which form of Proof of Date of Birth you have attached.		
Select <u>ONE</u> of the following:		
Birth Certificate	Immigration Papers	Baptismal / Faith Record
Passport	Canadian Citizenship Documents	

Please indicate which form of Proof of Ontario Residency you have attached.		
Select <u>TWO</u> of the following:		
Current Lease or Deed	Current Property Tax Bill	Current Home Utility Bill
Moving Bill		Current Bank Statement
Recent correspondence from a Municipal, Federal or Provincial Government Agency		Most recent original Income Tax Assessment

- Photo ID required- Driver's License, Passport etc. (a Health Card is not acceptable)
- Resume
- Transcript

Ensure that all documents are clear and legible. If submitting photos of documents, the photo must be taken straight on, be in focus, and have no glare.

I confirm that I have attached the SEVEN required documents as listed above

I confirm that I have downloaded and saved this application form to my computer prior to completion and filled in its entirety

Applications with missing or unclear documentation will not be processed.

Email completed application form and all required documents to psw@hdsb.ca

Once all documents are received and processed, you will be contacted with more information.