Seneca | WORK-INTEGRATED LEARNING

Student Declaration of Understanding

The Government of Ontario, through the Ministry of Colleges, Universities, Research Excellence and Security (MCURES), reimburses the Workplace Safety and Insurance Board (WSIB) for the cost of benefits paid to student trainees enrolled in approved programs at training agencies post secondary institutions.

Students on approved unpaid placements in Ontario are typically covered for work-related injuries through WSIB. For placements outside of Ontario (including international and other Canadian jurisdictions), MCURES provides private insurance coverage through Chubb Insurance Company of Canada. However, it is recommended that students maintain extended health care benefits through the applicable student insurance plan or other insurance plan.

Coverage provided by WSIB or MCURES covers workplace injuries only and does not cover workplace illnesses, including COVID-19. For more information on coverages, please visit https://www.ontario.ca/page/workplace-insurance-college-and-university-students-unpaid-work-placements

Important Notice for International Students Placed in their Home Country:
WSIB, Chubb Insurance, or Seneca-provided workplace insurance does not apply to international students who sustain a workplace injury or illness while participating in work placements in their home country. Coverage may be available through your placement employer or your home country's insurance system. It is your responsibility to determine what coverage, if any, is available prior to undertaking a placement in your home country.

Students are also strongly encouraged to maintain extended health care coverage through the applicable student insurance plan or another private insurance plan.

Student Declaration
The Seneca Student acknowledges; 1) I will ***immediately (within 24 hours)*** inform my Placement Supervisor and my Field Placement/WIL Co-ordinator of any injury or disease incurred at placement and will maintain regular contact with Seneca staff for the purpose of WSIB reporting and informing on any restrictions/accommodations during the course of my injury/illness, 2) in the event of an injury or disease is incurred at a placement, Seneca is required to disclose my personal information in compliance with WSIB or Chubb Insurance reporting, including disclosing information related to the Unpaid Work Placement and any WSIB claim or Chubb Insurance claim to the Ministry of Colleges, Universities, Research Excellence and Security. 3) By signing below, I confirm that I have read, understand the process within this document and confirm my commitment to report any workplace injury or disease to Seneca Polytechnic immediately and consent to the disclosure of information, as outlined within this document.

Student First and Last Name: _____

Student Signature: _____

Date: _____

Parent/Legal Guardian's Signature (for students under 18 years of age)

First and Last Name: _____

Signature: _____

Date: _____

Personal information collected by Seneca College is in accordance with sections 21, 39 and 49 of the Freedom of Information and Protection of Privacy Act and under the legal authority of the Ministry of Colleges and Universities Act, R.S.O. 1990, Regulation 770, and the Ontario Colleges of Applied Arts and Technology Act, 2002, Regulation 34/03. If you have any questions about the collection of personal information, please contact Seneca College's Privacy Office at 416.491.5050 extension 77846, or email privacyoffice@senecacollege.ca.