

2010 Canadian Labour Congress Ontario Region

Summer School August 22-27

CAW Family Education Centre,

Port Elgin, Ontario



Canadian Labour Congress

Congrès du travail du Canada



Compensation Essentials

Level I:

Workplace Insurance Rights & Obligations

- Examine the history of Workers Compensation
- Coverage of the Workplace Safety & Insurance Act
- Legal definition of accident and work related injuries
- Legal tests applied in decision making
- Statutory obligations and rights of workers and employers
- Re-employment and early and safe return to work obligations
- Understanding and completing Board forms

Level II:

Workplace Insurance Benefits & Representation

- Learn about the services and benefits available through the WSIB
- Proper conduct for representatives operating within the system
- Understand NEL, FEL, LOE, LMR and PPD and how the Board calculates worker benefits.
- Discuss legislative and policy changes - Bills 162, 165, 15 and 99
- Examine the WSIB's New Service Delivery Model
- Examine files and communications with physicians and Board staff
- Hands on experience working with a Board file



Comprehensive
Certificate
Training



ODRT

Workplace Insurance
Disability Prevention

Costs: Shared Room (\$875)

Trainer Cost (\$225)

Total (\$1100)

Single Room (\$1175)

Trainer Cost (\$225)

Total (\$1400)

Family Accommodation

Call CLC 416-441-3710

Registrations must be accompanied by payment. Make cheques or money orders payable to:
CLC Education Account and mail to: 305 - 15 Gervais Drive, Don Mills, Ontario, M3C 1Y8
Please complete registration form in its entirety on reverse side.

2010 Canadian Labour Congress Ontario Region
SUMMER SCHOOL REGISTRATION FORM

Please print and be sure to complete this form in its entirety as the rooms are pre-booked.

Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Tel: (H) _____ (W) _____ (Union) _____

E-Mail Address: _____

Union: _____ Local: _____

Union Address: _____ Postal Code: _____

Course Selection:

First Choice: _____

Second Choice: _____

Special Requirements:

- I need a Special Access Room (no extra charge)
- I need wheelchair access
- I have a hearing impairment (TTY phone and special doorbell light)
- I have a visual impairment and need:
 - accommodation for a Seeing Eye Dog
 - large print materials
- I need a special diet (please specify) _____

Child minding Required? Yes No If yes, please indicate child's age: _____

Cost and Payment

- Shared room (\$1,100.00) Single room (\$1,400.00)

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For further information, please contact the Ontario Regional office at 416-441-3710 Ext. 221 or 222, or 1-800-387-3500 or email: ontario-schools@clc-ctc.ca.

For Office Use Only

Receipt #: _____ Amount Paid _____

Date: _____