

Preferred language of service:

English      French

Ce formulaire est aussi disponible en français

## Participant Information

(Staff is available to help you complete this form)

FOR AGENCY USE ONLY

File Identifier

Please indicate which program you are applying for:

Job Connect

Summer Jobs Service

If you have previously participated in the **Job Connect Program**, state **when**:

from 

Day	Month	Year

to 

Day	Month	Year

If you have previously participated in **Summer Jobs Service**, state **when**:

from 

Day	Month	Year

to 

Day	Month	Year

### SECTION 1: PROFILE

Last name		First name		Initial	
Street address			City	Province	Postal code
Telephone no.		Alternative telephone no.		E-mail	
Best time to contact: a.m.      p.m.		Date of birth: Day      Month      Year		Age: _____	

### SECTION 2: WORK HISTORY AND EDUCATION

Are you legally entitled to work in Canada?      Yes      No		Do you have a Social Insurance Number (SIN)?      Yes      No		If you do not have a SIN #, have you applied for one?      Yes      No	
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#### Work History

Have you had paid employment **in** Canada?      Yes      No      Have you had paid employment **outside** Canada?      Yes      No

List **below** all work you have done, including volunteer work. Start with the **most recent** job/volunteer activity.

from <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px;">Day</td><td style="width: 20px;">Month</td><td style="width: 20px;">Year</td></tr><tr><td> </td><td> </td><td> </td></tr></table>		Day	Month	Year				to <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px;">Day</td><td style="width: 20px;">Month</td><td style="width: 20px;">Year</td></tr><tr><td> </td><td> </td><td> </td></tr></table>		Day	Month	Year				Company Name	
Day	Month	Year															
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Job title/duties				Reason for leaving													
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Day	Month	Year															
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## Education / Training History

Country in which Highest Education Level was attained: Canada Other Specify: \_\_\_\_\_

### Highest level COMPLETED

Grade 0-8	High School			Community College		University		Trade certificate/ professional accreditation
	Grade 9	Grade 10	Grade 11	Year 1	Year 2	Year 1	Year 2	
	Grade 12 (or equivalent)		OAC	Year 3	Year 4	Year 3	Year 4	Post graduate

Have you participated or do you participate in Ontario Youth Apprenticeship Program (OYAP)? Yes No Are you returning to school? Yes No

### SECTION 3

Are you employed now? Yes No

If "Yes", how many hours per week? \_\_\_\_\_ hours If "No", when did you last work? Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

What types of work are you interested in doing? (List the **top 3 job preferences**)

When are you available to start work? Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

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Type of job:	Actual start date (DD/MM/YYYY):	Completion date (DD/MM/YYYY)	Direct hire by employer:
			<u>Yes</u> <u>No</u>

### SECTION 4: SOURCE OF INCOME

Current source(s) of income:	Employment Insurance (EI)
Ontario Works (OW)	No income
Ontario Disability Support Program (ODSP)	Other _____
Dependent of OW / ODSP	
Workplace Safety Insurance Board (WSIB)	

Identify any health issues or disabilities that would require job accommodation:

Have you applied for Employment Insurance Benefits in the past 52 weeks? No Yes If "Yes", where \_\_\_\_\_ Unsure

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Is validation of OW/ODSP or EI status on file?	Is validation of income on file? (if Training Supports are provided)	Identify Proof of Entitlement documentation on file?
<u>Yes</u> <u>No</u>	<u>Yes</u> <u>No</u>	<u>Yes</u> <u>No</u>

### SECTION 5: NOTICE OF COLLECTION AND CONSENT

The Ministry of Training, Colleges and Universities provides funding to your Job Connect agency to provide the Job Connect program and/or the Summer Jobs Service. Your Job Connect agency has contracted with the Ministry to provide reports about the service it has provided to you, your satisfaction with the service, and other aspects of your educational and training experiences that will enable the Ministry to administer, fund, evaluate and monitor the services and to plan and deliver job training programs and services. The reports will identify you by a computer generated number but the Ministry will not collect your name or address. Your Job Connect agency has also contracted with the Ministry to allow the Ministry to review, inspect, monitor and audit its delivery of the service and administration of the funding and to do this the Ministry may need to have access to all personal information collected by your Job Connect agency, including your name and address, but only if an audit is conducted. By signing below, I give consent to the Ministry to indirectly collect and use personal information about me for these purposes.

The personal information collected and used by the Ministry is necessary to the proper administration of the Job Connect program, in accordance with s. 38(2) of the *Freedom of Information and Protection of Privacy Act*, R.S.O. 1990, c. F.31, as amended. Questions about the collection and use of your personal information may be addressed to: Director, Service Delivery Branch, Ministry of Training, Colleges and Universities, 33 Bloor St. E. Suite #200, Toronto, Ontario, M7A 2S2, or by phone at (416) 314-4268.

Participant's name (Please print)	Participant's signature	Date
	<u>X</u>	