

LAICHWILTACH FAMILY LIFE SOCIETY

BladeRunner Program

Application Form

Are you:

- Youth, 18 to 30 years
- must **NOT** be eligible for or receiving Employment Insurance benefits (within the last 3 years)
- unemployed
- not attending high school
- have limited or no work experience
- have barriers to employment

Do not write in shaded areas

Date interviewed: _____

Active Status: _____

- 1 – open – enrolled in program
- 2 – closed – not to be contacted
- 3 – dropped out of program

PERSONAL INFORMATION

Name: _____

Address: _____

Date of Birth: _____

PHONE NUMBER: _____

Native Heritage: _____

Band name: _____

Non-Status _____ Metis _____ Status _____

Status number: _____

Social Insurance Number: _____

Volunteer work: (yes/no) _____ If yes, where? What type of volunteer work?

Getting and keeping a job can be difficult. What would you say are the reasons you are not working right now?

How did you learn about this program?

- () Laichwiltach Family Life Society () Canada Employment () Social Worker () Friend
() Other: _____

What is your program goal?

What type of work should be avoided (i.e. height, power equipment, noise, dust, heavy lifting, prolonged standing/sitting, etc.)

Can you name 3 job areas that interest you (i.e. receptionist, mechanic)?

Have you attended other employment, modified or upgrading training programs in the past? If so, please state name of program, dates you attended and outcome:

Please write a brief paragraph on the word "commitment" and what it means to me... (please use back of paper)

I CONFIRM THAT THE INFORMATION PROVIDED IS ACCURATE AND FOR THE PURPOSES OF MAKING APPLICATION TO THE PROGRAM.

September 10-October 19 are the program dates

Signature of applicant Date

Signature of witness (Laichwiltach staff)