

J O B C O N N E C T AND/OR SUMMER JOBS SERVICE

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File Identifier

Preferred language of service:

English French

Ce formulaire est aussi disponible en français

Participant Information

(Staff is available to help you complete this form)

Please indicate which program you are applying for: Job Connect Summer Jobs Services

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: <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	Date of birth:	Day	Month	Year Age: _____

SECTION 2: WORK HISTORY AND EDUCATION

Are you legally entitled to work in Canada? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have a Social Insurance Number (SIN)? <input type="checkbox"/> Yes <input type="checkbox"/> No	If you do not have a SIN #, have you applied for one? <input type="checkbox"/> Yes <input type="checkbox"/> 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	Day	Month	Year	to	Day	Month	Year	Company Name
Job Title/Duties								Reason for leaving
from	Day	Month	Year	to	Day	Month	Year	Company Name
Job Title/Duties								Reason for leaving
from	Day	Month	Year	to	Day	Month	Year	Company Name
Job Title/Duties								Reason for leaving

Education / Training History

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

Highest level COMPLETED:

High School				Community College		University	
<input type="checkbox"/> Grade 8	<input type="checkbox"/> Grade 9	<input type="checkbox"/> Grade 10	<input type="checkbox"/> Grade 11	<input type="checkbox"/> Year 1	<input type="checkbox"/> Year 2	<input type="checkbox"/> Year 1	<input type="checkbox"/> Year 2
<input type="checkbox"/> Grade 12 (or equivalent)		<input type="checkbox"/> OAC		<input type="checkbox"/> Year 3	<input type="checkbox"/> Year 4	<input type="checkbox"/> Year 3	<input type="checkbox"/> Year 4

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 type 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: Yes No

SECTION 4: SOURCE OF INCOME

Current source(s) of income:

- Ontario Works (OW)
- Ontario Disability Support Program (ODSP)
- Dependent of OW / ODSP
- Workplace Safety Insurance Board (WSIB)

- Employment Insurance (EI)
- No Income
- Other _____

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? Yes No
Is validation of income on file? (if Training Supports are provided) Yes No
Identify Proof of Entitlement documentation on file? Yes No

SECTION 5: DECLARATION

I _____ agree to allow _____ (name of JC agency) to collect personal information and disclose this information to the Ministry of Training, Colleges and Universities. The Ministry of Training, Colleges and Universities is authorized to collect this personal information in order to administer the Job Connect and Summer Jobs Service programs.

X _____
Signature

DD MM YYYY

Date

Questions about the collection of this personal information may be addressed to the Ministry of Training, Colleges and Universities, Employment Preparation Manager, 23rd Floor, Mowat Block, 900 Bay Street, Toronto, Ontario, M7A 1L2 or, by phone at (416) 326-5837.

Job Connect/Summer Jobs Service agencies should refer to the Job Connect/Summer Jobs Service Guidelines for details on PIPEDA and form modifications.