REES PROGRAM
RESOURCES · EDUCATION · EMPLOYMENT · SUPPORT
465 Swift St. 250.388.9296

Community casual labour pool

cool aid.

Reset Form

OFFICE USE ONLY Intake Appointment	
Date:	
Time:	

Application Date: _____

Contact Information *(please print neatly)*

Name: _____ Address: _____ City: _____ Postal Code: _____

Phone: _____ SIN#: _____ Birth Date: _____

Background Information

Gender: _____ ☐ Prefer not to say Marital Status: ☐ Single ☐ Married or equivalent ☐ Prefer not to say

# of dependents: _____ ☐ Prefer not to say

Do you consider yourself: ☐ First Nations ☐ Registered/Treaty Indian ☐ Metis ☐ Inuit ☐ Not Indigenous ☐ Prefer not to say

Do you identify with a specific Nation, Band, Territory or cultural group *(specify)*: _____

Do you speak any Indigenous languages *(specify)*: _____

Do you have stable housing? ☐ Yes ☐ No How did you find out about the CCLP? _____

Are there any medical issues that might affect your ability to work? ☐ Yes ☐ No

Would any of the following affect your ability to work in some fields? ☐ Disability ☐ Illness ☐ Prefer not to say

Do you have a current driver's license? ☐ No ☐ Yes

Do you have a reliable insured vehicle? ☐ No ☐ Yes *(specify)*: ☐ Car ☐ Truck ☐ Van

What tools or equipment do you have? ☐ Safety boots ☐ Gloves ☐ Rain gear

Employment History

Employment Status: ☐ Employed ☐ Self-Employed ☐ Unemployed ☐ Not in the labour force

Job Title: _____ Name of Company: _____ How long did you work there? _____

☐ Full-time ☐ Part-time ☐ Wage ☐ Other: _____ Reason for leaving? _____

What is your career goal? _____ What job are you most interested in obtaining? _____

What jobs best suit your skills and abilities? _____

What jobs are you willing to accept?

☐ Carpentry	☐ Drywall	☐ Gardening	☐ Maintenance	☐ Packing/moving	☐ Retail	☐ Tree pruning
☐ Construction	☐ Landscaping	☐ House cleaning	☐ Mechanical repair	☐ Painting	☐ Roofing	☐ Yard work
☐ Demolition	☐ Electrical	☐ Janitorial	☐ Office	☐ Plumbing	☐ Site clean-up	

Education and Special Training

Last grade level completed: ☐ College *(specify program)*: _____ ☐ University *(specify program)*: _____

What job-related training or courses have you taken?

☐ Certificate/Diploma ☐ First Aid ☐ Serving it Right ☐ Super Host ☐ Time Management ☐ Trade ☐ WHMIS 2015

☐ Other: _____

The Community Casual Labour Pool gratefully thanks our Funders...

United Way Southern Vancouver Island island health Victoria Foundation

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Cool Aid Employment Services Participation Agreement

If you have a problem with drugs/alcohol that has not been addressed, we suggest you focus on this before attempting a job search. You are welcome to discuss your concerns with us while addressing this issue.

Initials

_____ If I accept a job, I will go to the job and will work to the best of my ability.

_____ I will dress appropriately for the job.

_____ If I cannot find the job site I will call the CCLP coordinator immediately and ask for directions.

_____ If I have a problem with an employer, leave a job site for any reason, or intend not to return when I am expected, I will call the CCLP coordinator immediately.

_____ I must be sober, and not smell of alcohol or be under the influence of any drugs when I go to a job.

_____ Inappropriate behavior, such as verbal or physical aggression will not be tolerated.

_____ I will not ask the employer for advances or for more money than I was told prior to expect.

_____ I will not bring anyone to the jobsite without prior consent of the CCLP coordinator.

_____ I understand that failure to abide by the above policies and procedures may result in dismissal from the Community Casual Labour Pool.

Name *(please print)*: _____ Signature: _____ Date: _____

CCLP Coordinator:_____ Signature: _____ Date: _____

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