



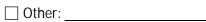


OFFICE USE ONLY				
Intake Appointment				
Date:				
Time:				

Application Date:			Date:
Contact Information (please print neatly)			Time:
Name:	Address:	City:	Postal Code:
Phone:	SIN#: B	irth Date:	
Background Information			
Gender: Prefer not to	say Marital Status: Sing	le   Married or equivalent	☐ Prefer not to say
# of dependents: Prefer not to	say		
Do you consider yourself:   First Nations	☐Registered/Treaty Indian ☐ Met	is □Inuit □NotIndigeno≀	us Prefer not to say
Do you identify with a specific Nation, Band	d, Territory or cultural group (specify):		
Do you speak any Indigenous languages (sp	ecify):		
Do you have stable housing? $\ \square$ Yes $\ \square$ N	lo How did you find out about the	e CCLP?	
Are there any medical issues that might aff	ect your ability to work?	☐ No	
Would any of the following affect your abil	ity to work in some fields? 🗌 Disab	oility 🗌 Illness 🔲 Prefer no	ot to say
Do you have a current driver's license?	No □Yes		
Do you have a reliable insured vehicle? $\ \square$	No □Yes <i>(specify)</i> : □Car □ Truck	∵ □ Van	
What tools or equipment do you have? $\  \  \  \  \  \  \  \  \  \  \  \  \ $	Safety boots □Gloves □Rain gear		
Employment History			
Employment Status: Employed Sel	f-Employed 🗌 Unemployed 🔲 N	lot in the labour force	
Job Title: Name of	of Company:	How long did you w	ork there?
☐ Full-time ☐ Part-time ☐ Wage ☐ C	Other: Reason for	leaving?	
What is your career goal?	What job are you mos	st interested in obtaining?	
What jobs best suit your skills and abilities?			
What jobs are you willing to accept?			
□ Carpentry       □ Drywall       □ Gard         □ Construction       □ Landscaping       □ Hous         □ Demolition       □ Electrical       □ Janite	e cleaning 🗌 Mechanical repair 🔲	Packing/moving Retail Painting Roofing Plumbing Site clea	
Education and Special Training			
Last grade level completed:  College (spe	cify 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
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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 coordinate	or 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 Co	pordinator:	Signature:	Date:			





