Upgrading

Themlúps te Secwépemc TTES TRADES & TRAINING PROGRAMS



Intake Form

Date Program				
Personal Information				
First Name Last Name	Initials			
te of Birth (YYYY-MM-DD) Social Insurance Number				
What funding will you use for living allowance during the program? EI Income AssistanceOther				
If other please list:				
Contact Information				
Street Address or PO Box				
City/Town/CommunityProvincePostal Code				
Telephone Cell Message				
E-mail Address Facebook Name				
Education Level				
No Formal Education Less than a Grade 10 Grade 10-12 Grade 12 Graduate/Dogwood GED				
Some Post Secondary Training Apprenticeship/Trade Certification University/College				
Aboriginal Identity				
Registered Non Status Metis Inuit Other On Reserve Off Reserve				
Band Name Band Province Status Number				

Upgrading Intake Form	TRemiúps te Secwép TTES TRADES & TRAINI		
Receiving EI Have receive	Current Student Unemployed for more d EI in the past 5 years Have received ma ne On Disability On WCB Canada	ternity EI in the past 5 years	
Lack of Work Experience	neck all that apply) Drivers License New to the Workforce Live in a Rural/Remote Location Physical Substance Abuse/A	, Emotional or Mental Health_	
Upgrading and Grade 12 Diplor Post Secondary	rested in? (Check all that apply) na Carpentry ProgramAgricultural a ation goals after completing training?		
Employer Employer Employer	n trades employment and training (Even if it w Hrs of Employment Hrs of Employment Hrs of Employment +Hrs of Employment	Year/s Worked _Year/s Worked _Year/s Worked	

Participant Consent to Release Information	Confidentiality Promise		
I,(print name) understand Tk'emlups te Secwepemc is		
collecting my personal information for the purpose of assessing, planning, and developing a personal construction			
trades plan geared towards entry into the carpentry trades program. I understand that my personal information could			
be shared with funding agencies and employers for the purpose of training or employment opportunities.			
Signature of Applicant	Date Signed		