



INVESTING IN WOMEN'S FUTURES
PROGRAM APPLICATION

PERSONAL INFORMATION

Focus for Ethnic Women wants to collect personal information by following responsible handling practices and the government's privacy laws. We collect and use personal information for the following reasons: To meet client needs, ensure the safety of our participants, staff and guests, and to meet the requirements of the government and regulatory boards.

Name: Last Name First Name Date: Day Month Year

Social Insurance #: Telephone:

Address:

City: Postal Code:

Email: Cell Phone:

Date of Birth: Day Month Year Country of Birth:

First Language: Last Country Lived In:

Arrived in Canada: Day Month Year Arrived in Kitchener-Waterloo: Day Month Year

Immigrant Status Citizen Family Class/Assisted Relative Refugee
Landed Immigrant Minister's Permit Visitor

Have you attended or are you attending English Language courses? Yes No
If YES, what level did you complete? Name of English School:

Are you receiving any financial assistance? Yes No
If YES, what kind? Employment Insurance (E.I.)
Ontario Works / Welfare Name of Social Worker Phone Number
Resettlement Assistance Program
Other (please explain)

Have you worked in Canada? Yes No Are you looking for a job? Yes No
Are you working now? Yes No Where? How many hours/wk

How many children do you have? How old are they? Do you require childcare while at Focus? Yes No
Transportation - How will you come to our Bridgeport location? Bus Walk Car
Get a Ride Bike

How did you hear about our program?

Which program(S) are you interested in registering for:
Industrial Sewing Machine Training Computer Individual Employment Counselling

Industrial Sewing Machine Training

Have you ever used a sewing Machine? Yes No

If YES, where? _____

What kind of machine? _____ Domestic Single Needle _____ Industrial Single Needle

 _____ Domestic Serger _____ Industrial Serger

Why do you want to learn to sew? _____ Employment _____ Self Employment _____ Personal Interest

 _____ Hobby (sew gifts, crafts) _____ Volunteer (make things for school)

Computer Training

What is your background with computers?

Keyboarding _____ None _____ Poor _____ Good _____ Excellent

MS Word _____ None _____ Poor _____ Good _____ Excellent

MS Excel _____ None _____ Poor _____ Good _____ Excellent

Internet _____ None _____ Poor _____ Good _____ Excellent

email _____ None _____ Poor _____ Good _____ Excellent

Individual Employment Counselling

EDUCATION

Please list all education in your home country, other countries and in Canada

Level	Name of school, City, Country	Years Attended (from ___ to ___)	Diploma, Degree, Certificate
High School/ Secondary		-	
College/ University		-	
Other		-	
Other		-	

WORK EXPERIENCE

Please list all previous work experience, including part-time and full time employment in you home country, other countries and in Canada.

Company	City, Country	Job/Position	Dates (from ___ to ___)	Reason for Leaving
			-	
			-	
			-	

I confirm that the information I have supplied on this registration form is valid and true to the best of my knowledge. I also agree that this information can be shared with Ontario Women’s Directorate, the funder of IWF, and other employment related parties.

Signature: _____

MEDIA RELEASE:

I give permission to Focus for Ethnic Women to take pictures and/or video of me to be used within the organization and building only.

Signature: _____

I give permission to Focus for Ethnic Women to take pictures and/or video of me to be used for future promotions/media/news coverage.

Signature: _____

Eligibility for Child Care and Transportation Assistance

(To be completed only if Childcare or Transportation Assistance are needed)

Name: _____ S.I.N.: _____ Phone #: _____

Address: _____
Street City Postal Code

Marital Status: Married / Common-law Divorced Single Widow

of Children and Their Ages: _____ Total # of people in family _____
Number Ages

Section 1 – Monthly Net Income	Self	Other
Employment Income		
EI Benefits		
Income/Social Assistance		
Alimony/ Child Support		
Self Employment		
Pension Income (eg. Employer Plan)		
Disability Income		
Worker Compensation Benefit (WCB)		
Canada Pension Plan (CPP)		
Child Tax Benefits		
Income from rental properties		
Severance Pay		
Any Other Sources of Income not listed above		
TOTAL		

Section 2 – Other Anticipated Sources of Funding	Self	Other
Student Loans		
Savings		
Scholarship/Bursary		
Investment Income		
Family/Parent/Guardian		
Any Other Sources of Income not listed above		
TOTAL		

Section 3 - Monthly Expenses	Amount
Basic Living Expenses	
◆ Rent/Mortgage/Room and Board	
◆ Food	
◆ Utilities (hydro, heat, water)	
◆ Telephone (basic line only)	
Other Incremental Costs	
◆ Other Personal Supports and Transportation	
◆ Dependent Care	
◆ Disability Needs	
TOTAL	

I am applying for: Transportation Assistance Child Care Assistance

Signature _____ Date _____

Office Use: Approved for Transportation Assistance _____ Child Care Assistance _____

E D Authorization _____ NOT APPROVED