



10) Have you received training support from:

HUMAN RESOURCES DEVELOPMENT CANADA

MIAWPUKEK HUMAN RESOURCES

CONNE RIVER HEALTH AND SOCIAL SERVICES

ST. ANNE'S SCHOOL

If yes, was it within the last five (5) years?  YES  NO

How many years ago? \_\_\_\_\_ years ago.

11) Do you have any disabilities?  YES  NO

If yes, what type. \_\_\_\_\_

**EMPLOYMENT GOALS**

1) What employment goal have you set for yourself?

\_\_\_\_\_

\_\_\_\_\_

2) What skills do you feel you have that may assist you in achieving your employment goals?

\_\_\_\_\_

\_\_\_\_\_

**I declare that the information and answers given by me on this application form are true to the best of my knowledge. I understand that this information may be used to determine eligibility for sponsorship.**

\_\_\_\_\_

**Signature** **Date**

**FOR OFFICE USE ONLY:**

DATE RECEIVED: \_\_\_\_\_ DATE CATS DOCUMENTED: \_\_\_\_\_

CRF: \_\_\_\_\_ DOCUMENTED BY: \_\_\_\_\_

EI ACTIVE:  YES  NO

EI REACHBACK:  YES  NO

DATE APPROVED: \_\_\_\_\_

Please forward all applications to:

Miawpukek Human Resources  
P.O. B ox 10  
Conne River Reserve  
Newfoundland  
AOH 1JO

Telephone Number: (709) 882-1272

Fax Number: (709) 882-2401