SKILLS FOR EMPLOYMENT TRAINING PROGRAM

MISSION STATEMENT: To provide various labour market services to First Nation members who are underemployed and have demonstrated a barrier to getting employment. These services are available to those First Nation members who are residing on or off reserve with the following communities:

* Wabasca/Desmarais
* Sandy Lake
* Calling Lake
* Chipewyan Lake
* Peerless Lake
* Trout Lake

PROGRAM DESCRIPTION: The Skills for Employment Training (SET) Program supports training interventions that will provide the client with basic foundation skills and/or occupational skills, which will enable them to prepare for, obtain and maintain employment. The SET Program support is available for programs that are fifty-two weeks (one year) or less in duration. Some examples of SET programs are as follows;

* Technical (professional) training that provides knowledge, skills and abilities to perform certain occupations
* Apprenticeship Training Programs
* Self-Employment Training Programs

Financial support can consist of, but is not limited to, the following;

* Tuition
* Book and supply costs
* Training allowance (monthly)
* Dependant care costs
* Travel funds (if necessary)

ELIGIBLE TRAINING INSTITUTES: Public training institutions (service providers) that provide skill training that will result in certification (accreditation) that is recognized and accepted by employers.
CLIENT ELIGIBILITY CRITERIA:
* Treaty status individuals residing in the Bigstone Cree Nation territory
* Unemployed, underemployed or employment threatened
* Have underwent an employability assessment and demonstrate an employment need/barrier interfering with their ability to work
* Demonstrate that a lack of employment skills/certification is what is preventing them from work and that the skill training will enable them to obtain sustainable employment
* Client is ready, willing, and able to pursue the training
* Client is 18 years of age or older and has been out of the regular school system for one calendar year
* Client does not have an over payment with Bigstone Cree Nation ASETS.
* Has not received previous financial assistance from BCN ASETS in the past year for Skills Training.
* Client needs to demonstrate that they are employment ready and the training will lead directly to employment, improve their employment potential and/or provide skills in an occupation that is in high demand.

APPLICATION PROCESS: In order for application to be processed in a timely matter, please ensure you include all requested documentation:
* Completed Skills for Training Application
* Copy of Status Card
* Letter of Acceptance from Institution
* Course Outline
* Cost of Tuition/Books/Supplies
* Provide all relevant transcripts, grade reports, diplomas, certificates and licenses
* Provide Alberta Treasury Branch (ATB) bank account information for direct deposit purposes.

* Should you not have a ATB account, your cheque will be mailed to your current address on file
* Sign the Post Secondary Release of Information
* Sign the Authorization to Release Information
* Completed Letter of Intent
* Completed Employer Research Section
* Decline letter from another funding institution if you reside outside the Bigstone Cree Nation territory

You will receive a phone call from the Career & Employment Counsellor to make an appointment to review and assess application. In order for your application to be processed in a timely manner, please return phone calls promptly and commit to attending any scheduled appointments.

PLEASE SEND YOUR COMPLETED APPLICATION BACK TO ASETS OFFICE AT LEAST 3 WEEKS PRIOR TO THE COURSE/PROGRAM START DATE.
APPLICATION FOR SKILLS FOR EMPLOYMENT TRAINING (52 weeks or less)

ALL APPLICANTS MUST COMPLETE APPLICATION AND SUBMIT REQUESTED DOCUMENTS. INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.

Name: __________________________________________ D.O.B: ______/_____/______
Last                First                Middle                DD     MM     YY

Address: __________________________________________
Box/Street Town/City Postal Code

How long have you lived at the above address? ___________ Previous Address: ________________________________

Phone Number: _______________ Cell Number: _______________ Email: __________________

Social Insurance Number: ______/_____/______ Gender: Male ___ Female ___

Aboriginal Group: Registered Indian ___ Non-Status Indian ___ Metis ___ Inuit ___

Status Number: _________________________ First Nation: ________________________________

COPY OF STATUS CARD MUST BE ON FILE

Residence: On Reserve ____ Off Reserve ____ Language Spoken: English ____ Cree ____ Both ____ Other ____

Marital Status: Married or Common-Law ____ Single ____ Separated ____ Divorced ____ Widowed ____

Dependants: Yes ____ No ____ How many? ____ Ages: 0-5 ____ 6-11 ____ 12-18 ____

Have you been assisted by ASETS before? _______ For what services? _____________________________

Are you currently Employed? _______ If yes, which company? _____________________________

Are you Self-Employed (own your own business)? _______ If yes, company name? _____________________________

Do you have a valid drivers license? Class: _____ Province: _____ Expiry: _____

Do you have a specialized drivers license? Class: _____ Province: _____ Expiry: _____

For office use only: CRF _____ RB _____ EI _____
What training/program are you applying for? ____________________________________________________________________________

Start Date: __________________________ End Date: __________________________

Institution: __________________________ City/Town: __________________________

Explain why you chose to apply for this field of training? ________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

What type financial assistance are you requesting (Tuition/Books/Training Allowance etc)? ______________

______________________________________________________________________________

______________________________________________________________________________

What is your short-term goal? (goals that you want to accomplish within 12 months) ______________

______________________________________________________________________________

______________________________________________________________________________

What is your long-term goal? (goals that you want to accomplish in the next 5 years) ______________

______________________________________________________________________________

______________________________________________________________________________

List three drawbacks to achieving your goals:

1. __________________________________________________________________________

2. __________________________________________________________________________

3. __________________________________________________________________________

EDUCATION INFORMATION

Are you currently a student? _____ If yes, where? _______________________________________

Highest Grade Completed: ______________ School: ___________________________ Year __________

Post Secondary: (list completed programs/training starting with most recent)

Program: ______________ School: ___________________________ Year __________

Program: ______________ School: ___________________________ Year __________

Program: ______________ School: ___________________________ Year __________

Program: ______________ School: ___________________________ Year __________

Are you a Registered Apprentice? Trade: ___________________________ Level: __________

(Welder/Carpenter/Electrician etc) Institution: ___________________________ Year: __________
**CLIENT HISTORY**

During the last 3 years, were you at any time: (documentation must be provided if applicable)

In receipt of Student Finance Funding? ______ Dates: ______________________________

In receipt of Social Assistance? ______ Dates: ______________________________

In receipt of EI benefits? ______ Dates: ______________________________

Have you received funding or sponsorship from Bigstone ASETS or Bigstone Education before? ______

If yes, what program? ___________________________________________________ Year: _____________

Do you have any health problems that would interfere with your ability to obtain/maintain employment? If yes, please explain: _______________________________________________________

**CURRENT MONTHLY INCOME:**

<table>
<thead>
<tr>
<th>INCOME</th>
<th>$ __________</th>
<th>EXPENSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work Income</td>
<td>$ __________</td>
<td>Housing</td>
</tr>
<tr>
<td>Spouse’s Work Income</td>
<td>$ __________</td>
<td>Utilities</td>
</tr>
<tr>
<td>Employment Insurance</td>
<td>$ __________</td>
<td>Food</td>
</tr>
<tr>
<td>Support for Independence/AISH</td>
<td>$ __________</td>
<td>Transportation</td>
</tr>
<tr>
<td>Child Support</td>
<td>$ __________</td>
<td>Childcare</td>
</tr>
<tr>
<td>Student Loan</td>
<td>$ __________</td>
<td>Medical Coverage</td>
</tr>
<tr>
<td>Grants/Bursaries/Scholarships</td>
<td>$ __________</td>
<td>Clothing</td>
</tr>
<tr>
<td>Savings</td>
<td>$ __________</td>
<td>Debt Payments</td>
</tr>
<tr>
<td>Other Income</td>
<td>$ __________</td>
<td>Other Expenses</td>
</tr>
<tr>
<td><strong>Total Monthly Income</strong></td>
<td>$ __________</td>
<td><strong>Total Monthly Expenses</strong></td>
</tr>
</tbody>
</table>

Is this income and expense statement typical of the last 4 months? _______________________________________________________

If no, please explain:________________________________________________________________________________________

________________________________________________________________________________________________

________________________________________________________________________________________________
EMPLOYER RESEARCH

**EMPLOYED APPLICANTS:** Include a support letter from your current employer stating the employment benefits of the requested training.

**UNEMPLOYED APPLICANTS:** A minimum of three potential employers must be researched which pertain to the training you are requesting. Complete the section below.

<table>
<thead>
<tr>
<th>Organization/Company:</th>
<th>Contact Name:</th>
<th>Phone:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Position pursuing: ________________________________________________________________________________

Starting Wage: $ __________________ Potential Wage (After 1 Year): $ __________________

Does the potential employer feel this training is beneficial to the position? Would you require any additional training for the position? __________________________________________________________________________

________________________________________________________________________________________________

What is the likelihood of employment after completion of training at this organization? __________________

________________________________________________________________________________________________

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Position pursuing: ________________________________________________________________________________

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Does the potential employer feel this training is beneficial to the position? Would you require any additional training for the position? __________________________________________________________________________

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Position pursuing: ________________________________________________________________________________

Starting Wage: $ __________________ Potential Wage (After 1 Year): $ __________________

Does the potential employer feel this training is beneficial to the position? Would you require any additional training for the position? __________________________________________________________________________

________________________________________________________________________________________________

What is the likelihood of employment after completion of training at this organization? __________________

________________________________________________________________________________________________
ABORIGINAL SKILLS & EMPLOYMENT
TRAINING STRATEGY (ASETS)

P.O. BOX 549
Wabasca, AB T0G 2K0
Phone: 780.891.3313
Fax: 780.891.3301
Toll Free: 1.866.891.3313
Email: bcnasets@bigstone.ca

POST SECONDARY RELEASE OF INFORMATION FORM

The Information that you provide is collected and managed in compliance with The Freedom of Information and Protection of Privacy Act (FOIP)

I, ____________________________________________, Student I.D # ______________________

authorize Bigstone Cree Nation Aboriginal Skills & Employment Training Strategy (ASETS) Career & Employment Counsellor and Director to obtain any student information regarding my academic status from _________________________________________________. This includes inquiries regarding attendance, course, grades, tuition and fees and information pertaining to my sponsorship, effective ____________________________________ to _______________________________________.

____________________________________________    __________________________________________
Student Print Name    Date

____________________________________________
Student Signature
I hereby authorize Bigstone Cree Nation Aboriginal Skills & Employment Training Strategy (ASETS) to release information about the status and benefit of my Employment Insurance claim to determine my eligibility for the program and/or for alternative income support. This authorization will remain in effect until the above claimant terminates UNLESS I give written instruction to cancel authorization.

DELEGATED AUTHORITY:

BIGSTONE CREE NATION
ABELORINAL SKILLS & EMPLOYMENT TRAINING STRATEGY (ASETS)

______________________________   ________________________________
CAREER & EMPLOYMENT COUNSELLOR

BOX 549

WABASCA, AB T0G 2K0

PHONE: (780) 891 –3313 FAX: (780) 891 –3301

______________________________   ________________________________
Student Name (printed) Career & Employment Counsellor (printed)

______________________________
Student Signature

______________________________
Career & Employment Counsellor Signature

______________________________
Date Signed

______________________________
Date Signed
LETTER OF INTENT
(Explaining what your long term career goals are)

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Applicant Signature __________________________________  Date _______________________________
In order for application to be processed in a timely matter, please ensure you include all requested documentation:

- Completed Skills for Training Application
- Copy of Status Card
- Letter of Acceptance from Institution
- Course Outline
- Cost of Tuition/Books/Supplies
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\textbf{PLEASE SEND YOUR COMPLETED APPLICATION BACK TO ASETS OFFICE AT LEAST \underline{3 WEEKS PRIOR} TO THE COURSE/PROGRAM START DATE.}

\section*{CAREER RESEARCH}

I have been informed that all my personal information that has been collected and compiled are for the purpose of the Bigstone Cree Nation Aboriginal Skills & Employment Training Strategy (ASETS) Agreement, and that this information will be shared with Human Resource Development Canada.

Applicant Signature \underline{__________________________________________} Date \underline{__________________________} Career & Employment Counsellor Signature \underline{__________________________________________} Date \underline{__________________________}

\section*{EMPLOYMENT AND SPONSORSHIP AGREEMENT}

The goal of Bigstone Cree Nation. Labour Market Development Program and Human Resource Development Canada is to develop Skills Development Training to obtain and maintain employment. Therefore, you are expected to seek employment immediately upon completion of training.

- I agree that I will inform Bigstone Cree Nation ASETS of any changes in my personal/education/employment information that may effect/advance my employment search.
- I agree to have my name and phone number to be given to potential employers and that I will also periodically list companies I want my resume to be faxed or emailed to.
- I agree to complete the registration forms, as the Bigstone Cree Nation (ASETS) office deems proper.
- I agree to the training that the Career & Employment Counsellor and I deem necessary.
- I agree to inform Bigstone Cree Nation (ASETS) office if I receive any type of employment.
- I agree to keep in contact with Bigstone Cree Nation (ASETS) office regarding my employment status, as my file will be considered inactive after 3 months of non-contact with the office.

I do solemnly promise to uphold this agreement. I will inform the Bigstone Cree Nation (ASETS) office as to any changes in my information that may effect my funding or future employment.

Applicant Signature \underline{__________________________________________} Date \underline{__________________________} Career & Employment Counsellor Signature \underline{__________________________________________} Date \underline{__________________________}