



2023-2024 Skills Link Program– ICT Youth Application Form

Deadline: July 14, 2023

Youth Contact Information			
Given Name		Family Name	
Address			
City		Postal Code	
Phone		Email	
Name of community			
Date of birth (YY-MM-DD)		Are you a registered Band Member? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Age		Band number:	
ICT Work Placement			
Employer			
Manager/Supervisor	Name:		
	Phone:		Email: <input type="text"/>
Employment period	Start Date:	End Date:	
Youth Personal Profile			
Official Language: English <input type="checkbox"/> French <input type="checkbox"/>			
Do you have a disability? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Current employment situation: Unemployed <input type="checkbox"/> Under-employed <input type="checkbox"/>			
Highest Level of Education Completed:			
Grade 8 (Secondary II) or less		Some college	Some university at the bachelor's level
Between Gr. 9 and 12 (Sec. III & V)		Diploma	Bachelors
High School		Certificate	Graduate Studies
What is your goal at the start of your placement?			
Become employed		Become self-employed	Return to School
In the beginning of the work placement, will you be receiving employment insurance? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Youth willing to travel (expenses are covered) and has the appropriate identification needed (Quebec Health Card, etc.) YES <input type="checkbox"/> NO <input type="checkbox"/> (Explain):			
Youth Declaration (The information provided is accurate to the best of my knowledge).			
Name of Youth (print):			
Signature:			
Date: (YY-MM-DD)			

Please, return this form by fax or email upon completion.

Mail: nbrunelle@cepn-fnec.com **Fax:** 418 842-9988