



MCFN Employment & Training Registration Process

1. You must meet the following criteria to register with our office:
 - Be a First Nation or Inuit Person
 - Live in the Regional Municipality of Wood Buffalo
2. If you meet the above criteria, you then need to fill out a registration form and status verification form for our office (request this form from the Employment Clerk or Manager). **It is mandatory that you fill out all the information provided on the forms.**
3. Once we have received your registration, corresponding documents (Diplomas, certificates, tickets, licenses, etc.), and status verification from Mikisew Cree First Nation we will begin to process your registration.
4. Once your registration is finalized and processed, a resume will be created for you or you can use the client computer to print or update one.
5. After your scheduled meeting with the Employment and Training Coordinator you will then have access to all of the services provided in the office which includes:
 - Access to Client Office, which offers a Computer with Internet Access, Telephone for client usage for employment, and educational purposes (long distance calls may be made, ask secretary to put calls through), Client Workstations, and Bulletin Board for any pertinent postings.
 - Use of Fax Machine and Photocopier
 - Educational Assistance and Counseling
 - Job Referrals, Employer Contacts
 - Information Gathering
 - Resume and Cover Letter writing and assistance (Resumes are done on a first come, first served basis, it is up to the client to ensure their resume is proof read and up to their standards)
 - Access to Job Posting Binder which is updated weekly with Fort McMurray and surrounding areas Job Posts.
 - Access to any and all resources and/or reading materials available from our office (ask Employment and Training Coordinator or Employment Clerk for details)

Mikisew Cree First Nation Employment & Training

P.O. Box 348

Fort Chipewyan, AB T0P 1B0

Phone: (780) 697-3811

Fax: (780) 780-697-3950

Email: employment@mikisewcree.ca



Mikisew Cree First Nation-Employment and Training Services

Canada

Client Registration Form (Confidential)

| | | | | |
|---|--|-----------------------------|---|------------------------|
| Social Insurance Number ____/____/____ (Mandatory) | Mr. ___ Mrs. ___ Ms. ___ Miss ___ | Family Name _____ | First Name & Initial _____ | Male ___ Female ___ |
| Mailing Address _____ | | City/Town _____ | Postal Code _____ | |
| Telephone Number (Mandatory) () _____ | Work Number () _____ | Message Number () _____ | Email Address (Mandatory) _____ | |
| Date of Birth ____/____/____ month day year | (Mandatory) Treaty _____ Inuit _____ Non-Status _____ Métis _____ Band Name: _____ Treaty # _____ Language Spoken: English ___ Cree ___ Dene ___ Others: _____ | | | |
| Marital Status Single _____ Married/Common-law _____ Other _____ | | | Number of Dependants _____ Ages: _____ | |
| Employment/Financial Status | | | | |
| Employed: _____ (Full time) _____ (Part-time) _____ Unemployed: _____ Student: _____ E.I.: _____ Social Assistance: _____ AISH: _____ Other: _____ Do you have a Disability: _____ | | | | |
| (Mandatory) | | | | |
| Grade Completed _____ Name of School _____ City/Prov. _____ Year _____ | | | | |
| Upgrading Level _____ GED _____ Name of College/University _____ | | | | |
| Program attended _____ Year _____ Certificate ___ Diploma ___ Degree ___ | | | | |
| Are you indentured as a journeyman or apprentice? Yes No Trade _____ Year _____ | | | | |
| Certificates/Tickets | | | | |
| First Aide/CPR ___ WHIMIS ___ H2S Alive ___ CSTS ___ OSSA ___ Fire Fighter & level _____ | | | | |
| Others: _____ | | | | |
| Drivers License: Yes No License Class _____ Province _____ License # _____ | | | | |

Do you have a vehicle? Yes ___ No ___ Do you rely on public transit? Yes ___ No ___

EMPLOYMENT HISTORY

Complete the following section in FULL- It will help us determine appropriate level of services.

| | Most Recent Employer | Second Most Recent | Third Most Recent | Fourth Most Recent |
|--------------------|----------------------|--------------------|-------------------|--------------------|
| Company | | | | |
| Job Title & Duties | | | | |
| Start Date | | | | |
| End Date | | | | |
| Wages \$ | | | | |
| Reason Left | | | | |

Are you seeking employment at the present time? Yes ___ No ___ If No, reason _____

What type of work are you most qualified for at present time? (1st Option) _____

(2nd Option) _____ (3rd Option) _____ Are you bondable? Yes ___ No ___

How long have you been unemployed and actively searching for work? _____

Are you willing to relocate for employment? Yes ___ No ___ Where to? _____

What is your long term career goal? _____

References:

Please provide names of two or three individuals who can comment on your occupational qualifications and performance. (Non-family related, preferably someone who has worked with you. A supervisor is ideal).

Name _____ Company _____ Title _____ Phone () _____

Name _____ Company _____ Title _____ Phone () _____

Name _____ Company _____ Title _____ Phone () _____

Please ensure that you update our office to any changes of your address, phone number, job status and educational information.

Initial

I give my consent to the Mikisew Cree First Nation- Employment & Training Manager to have access or discuss with other service providers any pertinent information regarding my file. I am aware that all information will be kept confidential.

Initial

I am fully aware that should I receive sponsorship from the Mikisew Cree First Nation Employment & Training and should I *QUIT* or get *TERMINATED*, I will be asked to pay back the amount of tuition and books. I also won't be eligible for funding for a year or so.

Initial

Any information that is misleading or misrepresented will not be eligible for services at the Mikisew Cree First Nation- Employment & Training office.

Initial

| | |
|--|---|
| Name (print): _____ First Name Initial Family Name(surname) | Date: _____ |
| Signature: _____ | _____/_____/_____ month day year |

Employability Assessment Worksheet for Client: _____

| | |
|---|---|
| <p>Career Decision Making</p> <ul style="list-style-type: none"> -Has researched career/employment goal -Occupation matches interests, values and personal characteristics -The occupation fits personal / family circumstances - Is aware of employment opportunities / labour demand in the areas where they prepared to work (shift work, work away from home) - is there work for that occupation in the area & pay is sufficient -Knows where training can be obtained and training dates -Training meets Employer needs <p>Notes:</p> | <p>Skill Enhancement</p> <ul style="list-style-type: none"> -What skills do they have now & is skill level up to occupation demands -Communication & computer skills-can read, write and communicate at appropriate level for the job -Labour Force attachment- work experience meets industry standards -Job Market factors-is there a demand for these skills -Income-will current skills provide sufficient earnings -Self Management Skills appropriate for occupation <p>Notes:</p> |
| <p>Job Search</p> <ul style="list-style-type: none"> -Does age/Criminal record impact employment prospects -Favorable presentation/appearance (dress/hygiene) -Can handle job interviews-Confident about marketing self -Understands and is able to prepare own resume -Resume is current and appropriate for employment type -Positive work references available -Has reliable transportation for work -Has telephone/message system in place for job search <p>Notes:</p> | <p>Employment Maintenance</p> <ul style="list-style-type: none"> -Does physical/mental health affect employment -Do addictions (alcohol/drugs/ gambling) affect employment -Do Family issues affect employment -Is child care with backup in place -Is housing adequate and affordable -What is their attitude and behaviors to work -Can manage conflict -Are they Ready, willing & able for work, no pending appointments <p>Notes:</p> |