

## General Carpentry Pre-Apprenticeship Program for Women

The General Carpenter Pre-Apprenticeship Program for Women 2023 intake will run from April 24, 2023 to September 29, 2023. Please visit [www.canadorecollege.ca/pre-apprenticeship](http://www.canadorecollege.ca/pre-apprenticeship) for more information.

### **APPLICATION CHECKLIST**

The program application is a two-step process. Once we receive your application we will review it, and eligible applicants will be contacted to set up a telephone interview to further discuss your interest in the program.

This program is funded through the Government of Ontario, and applicants must meet eligibility requirements. These are:

- Must be 19 years of age or older
- Must be a permanent resident of Ontario, and eligible to work in Canada
- Must meet low-income eligibility criteria
- Must have an OSSD or minimum of Grade 10 completed to meet apprenticeship criteria. *\*Those with proof of a High school Diploma or Equivalent (GED, ACE) will likely be accepted.*

To assist in the processing time of your application, ensure that you complete your application in FULL, and to further help your application processing, submit it with the information indicated below.

Attached you will find the following which you will need to provide:

- ☐ Application Forms- Please fill in ALL AREAS

You will also need to provide the following:

- ☐ Copy of your High School Transcripts, High School Diploma or Equivalency

If you have not completed your High School diploma, a minimum of grade 10 must be completed, including grade 10 Math & Grade 10 English. Please provide the following:

- ☐ Copy of your high school transcripts (please contact your high school to obtain a copy)

The deadline to apply is **March 24, 2023**. Applications are being accepted now, and spots are limited. If you will be applying for sponsorship or funding through your band, please submit your application as soon as possible to avoid delays.

### **Submit Application In-Person, by Email or by Fax To:**

**Marissa Gillies-Linklater**

Project Lead

P.O. Box 5001, North Bay, ON. P1B 8K9

Marissa.GilliesLinklater@canadorecollege.ca

705-474-7600 ext. 5854 cell: 705-471-6603

Fax: 705-474-2384

# General Carpentry Pre-Apprenticeship Program for Women

Start and End Dates: April 24, 2023- September 29, 2023 (Please Complete Form *in Full* to Avoid Delays)

## Registration Form

Last Name	Middle Initial	First Name
Previous Name (if applicable)	Street Address	
City	Province	Postal Code
Telephone	Email	
Date of Birth (YY/MM/DD)	Age	

**Are you of Indigenous Descent?** Yes ☐ No ☐

Aboriginal Descent (if applicable) First Nation ☐ (please specify) \_\_\_\_\_

Métis ☐ Inuit ☐ Non-Status ☐

**Please check:**

How did you hear about the program: Friendship Centre ☐ Friend ☐ Family ☐ Flyer ☐ Email ☐  
 Information Session ☐ Facebook ☐ Employment Office ☐ OW Worker ☐ Other: \_\_\_\_\_

## Educational Information

Do you have (check any that apply)

- An Ontario secondary school diploma? Yes ☐ No ☐ Year of graduation \_\_\_\_\_  
 If **NO**, What is the highest Grade Achieved? \_\_\_\_\_  
 Did you Complete Grade 10 Math & Grade 10 English? Yes ☐ No ☐  
 How many high school credits have you achieved? \_\_\_\_\_

- A secondary school diploma from outside Ontario? Yes ☐ No ☐ Year of graduation \_\_\_\_\_  
 If **YES**, from where? \_\_\_\_\_

- A GED (secondary school equivalence) Yes ☐ No ☐ Year of completion \_\_\_\_\_
- Any other secondary school equivalence (dual-credit, ACE): If "other", please specify \_\_\_\_\_
- Is there any other relevant educational information you would like to include?  
 \_\_\_\_\_

**My high school transcript is attached.** Yes ☐ No ☐

(Please supply a copy of your transcript for credits achieved or High School Diploma if possible. Please email to **Marissa.GilliesLinklater@canadorecollege.ca**)

Have you attended college or university? Yes ☐ No ☐  
 If yes, what was the name of the college or university? \_\_\_\_\_  
 What program or course did you study? \_\_\_\_\_

Did you graduate or complete your program or course? Yes ☐ No ☐  
 If yes, what year did you graduate or complete? \_\_\_\_\_

**Please briefly describe your career goals, and any experience you have related to the construction field/industry**

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## Transportation

Do you have a valid driver's license: Yes ☐ No ☐

Do you have access to a vehicle: Yes ☐ No ☐

What type of transportation will you use while in training? Own Car ☐ Get a ride ☐  
 City Bus ☐ Walk ☐

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## Employment Information

I am currently employed: Yes ☐ No ☐

If yes: Full-time ☐ Part-time ☐

## Your living expenses while in training:

I will need to leave my home community for this training: Yes ☐ No ☐

I live at home with: Parent(S) ☐ Spouse ☐ Single ☐ Single Parent ☐ Number Of Dependents: \_\_\_\_\_

I will be looking into daycare for my dependents: Yes ☐ No ☐

I will be applying for sponsorship for living expenses: Yes ☐ No ☐

I require information about Canadore's Residence Facility: Yes ☐ No ☐

## Sponsorship Information (Please check any items that apply to you.)

I am currently receiving benefits from Ontario Works ☐ WSIB ☐  
Service Canada (EI) ☐ ODSP ☐  
Band Sponsored ☐ (Please specify) \_\_\_\_\_  
Other (please specify) \_\_\_\_\_

Name of Case Manager \_\_\_\_\_

**PLEASE NOTE:** If you are receiving benefits from Ontario Works, WSIB, or Service Canada (EI), or any other sponsoring agency, and you are offered a seat in the Pre-Apprenticeship Program, your sponsoring agency must approve your participation in the training program prior to the start-date.

## In case of an emergency, whom can we contact?

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

## Consent to Disclosure

I certify that the above information is true and complete. I understand that any false or incomplete information may invalidate my application. I have read the Freedom of Information and Privacy Protection statement below. I authorize my previous educational institutions and/or the Ministry of Education to release my academic information and school record to the above mentioned college. I also authorize the release of this information to the Ministry of Training, Colleges and Universities. I authorize Canadore College to disclose academic information as required to sponsoring agencies or other adult education providers.

Applicant's Name (please print) \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

### Freedom of Information and Protection of Individual Privacy

The personal information on this application is collected under the legal authority of the Ministry of Colleges and Universities Act, R.S.O. 1990, c.M.19, s.5 and Regulation 770, R.R.O. 1990, s.8. The information is used for the administration and statistical purposes of the College and/or the Ministries and Agencies of the Government of Ontario and the Government of Canada. If you have any questions regarding the collection and use of this personal information, please contact the Registrar of the College.

## For further information contact:

### Marissa Gillies-Linklater

Project Lead,

[Marissa.GilliesLinklater@canadorecollege.ca](mailto:Marissa.GilliesLinklater@canadorecollege.ca)

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