



Self Employment for Newcomers
Participant Application Form

Section A : Personal Information

Last Name: _____

Given Name (s): _____

SIN: _____ Gender: M F

Birth date (YY/MM/DD) ___/___/___

Current Residential Address:

City: _____ Province: _____

Postal Code: _____

Telephone: _____

Other Contact Phone: _____

Email Address: _____

Immigration Status:

<input type="checkbox"/> Canadian Citizen	<input type="checkbox"/> Permanent Resident	<input type="checkbox"/> Protected Person Selected for Permanent Residence
<input type="checkbox"/> Caregiver	<input type="checkbox"/> Temporary Foreign Worker	<input type="checkbox"/> Convention Refugee
<input type="checkbox"/> Other		

Did you immigrate to Canada: Yes No

Participant Identification Source:

<input type="checkbox"/> Driver's Licence	<input type="checkbox"/> Birth Certificate	<input type="checkbox"/> BCID	<input type="checkbox"/> Passport
<input type="checkbox"/> PR Card	<input type="checkbox"/> Status Card	<input type="checkbox"/> Other (please specify)	



Section B : Additional Information

1. Please indicate your highest level of education completed

<input type="checkbox"/> less than High School	<input type="checkbox"/> Post-Secondary Diploma or degree
<input type="checkbox"/> High School diploma or recognized equivalent	<input type="checkbox"/> Post-graduate degree
<input type="checkbox"/> Trade Certificate or Apprenticeship Program	<input type="checkbox"/> Unknown

2. English level (Please '☐' only 1 box)

<input type="checkbox"/> Level 5	<input type="checkbox"/> Level 6	<input type="checkbox"/> Level 7	<input type="checkbox"/> Level 8 or higher
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3. How did you hear about us?

<input type="checkbox"/> Family/ Friend	<input type="checkbox"/> Immigrant consultant/lawyer	<input type="checkbox"/> North Shore Multicultural Society
<input type="checkbox"/> NSMS website	<input type="checkbox"/> Meetup website	<input type="checkbox"/> YMCA
<input type="checkbox"/> YMCA website	<input type="checkbox"/> In Canada Orientation	<input type="checkbox"/> Newspaper / public media
<input type="checkbox"/> NSMS Program flyer	<input type="checkbox"/> Government website / publication	<input type="checkbox"/> School
<input type="checkbox"/> YMCA Program flyer	<input type="checkbox"/> Settlement Service Provider	<input type="checkbox"/> Library / Community Centre
<input type="checkbox"/> Employer / coworker	<input type="checkbox"/> Ethnic / religious organization	<input type="checkbox"/> Other

4. What was your job in your home country? _____

5. Did you run a business in your home country? _____

6. Do you have a Settlement Worker at NSMS or other (please state name of organization)? _____
If so, please state your Settlement Worker name?

7. Do you have a Case Manager at NSMS or other (please state name of organization)? _____
If so, please state your Case Manager name?



Section C: Privacy and Participation Agreement

I hereby confirm that I am over the age of 19 and certify the information provided in this application is true and factual; or, to the extent that I am under the age of 19, have had my parent or guardian review this application and consent on my behalf.

Print Name: _____

Signature: _____ Date: _____

Print Name of Parent or Guardian (if applicable): _____

Signature: _____ Date: _____

Please return your completed application to YMCA Self Employment Staff



Important Information About Your Privacy

The YMCA of Greater Vancouver is committed to protecting personal information by following responsible information handling practices, in keeping with privacy laws.

We collect, use and disclose personal data in order to better meet your service needs, to ensure the safety of our participants, for statistical purposes, to inform you about the YMCA program or service in which you are registered, and to satisfy government and regulatory obligations.

For more information on the YMCA's commitment to privacy, please visit our web site at www.gv.ymca.ca.