## YUKON COLLEGE

## $\textbf{Targeted Initiatives for Older Workers} \ (\textbf{TIOW}) \ \textbf{Program}$

## **Student Application Form**

Last Name:		First Name:					
Stree	et Address:	Apartment/Unit #: Province: Postal Code:					
City:	<u> </u>						
Phone: (h)(c)		Email:					
1.	Date of Birth Day Month _	Year					
2.	Are you currently unemployed?	Yes No					
3.	How long have you been unemployed?						
4.	Why did you leave your last job?						
5.							
6.	What do you feel are the major reasons to	that you are not working?					
7.	What are your future employment goals	? What type of employment are you wanting to					
	pursue?						
	Are you prepared to spend 5 hours per d	ay at five days per week in a classroom for ten					
	weeks? Yes No						

8.	Would you need any classroom supports to accommodate any personal issues such as						
	vision, hearing, arthritis, etc.						
	Yes No						
	If yes, please explain:						
9.	9. Below are some of the major topics that we will be covering in the TIOW program.						
	Please indicate how important each topic is to you by placing an X in the						
	TOPIC	Not Important	Somewhat Important	Important	Very Important		
First							
	Computer Skills						
	(Email, Word, Excel, Powerpoint)						
Conflict Resolution							
Foodsafe WHMIS							
Work Placement (4 weeks)							
Resume Writing							
Job Interview Skills							
Emp	loyment Standards and						
	kplace Safety						
	awareness (personality type,						
	ing styles)						
Servi	ices for Seniors						
Appli	icant Signature	Date					
For m	nore information, please call (867	) 456-8601 c	or email				

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