



KW Career Compass Summer Job Skills Builder 2021

What are you doing this summer?

Let's focus on getting YOU ready for work.

KW Career Compass can help you prepare for your future job!

Job Coaches are available to assist you with

- Identifying your interests, strengths and challenges
- Creating a plan to develop your skills
- Learning more about the jobs you may be interested in
- Experiencing hands on learning through mock interviews, work sampling and site tours
- Obtaining summer work experience if able based on pandemic limitations

To apply, you MUST:

- 1. Complete and send in the **full application** and current resume by **May 17, 2021** to KW Habilitation:
 - Mail or in person: 99 Ottawa Street South, Kitchener, ON, N2G 3S8
 - Email: info@kwcareercompass.org

Please make each application to the Attention of Stacey Mitchell.

- 2. Self-identify as living with a disability and/or experience barriers to employment.
- 3. Be able to find own way to and from classes and meetings. (We can provide bus route training as needed!)
- 4. Commit to:
 - Attending and joining all skill building opportunities.
 - Following the scheduled hours/times as agreed upon by you and your Job Coach.
 - Only being absent if you are ill or have an emergency situation to deal with.
 - Follow all Infection Prevention and Control Measures in place including screening and PPE protocols (please see attached Job Skills Builder Information & Requirements)

If you have any questions about **KW Career Compass Summer Job Skills Builder 2021**, or need help filling out the application please contact **Stacey Mitchell**, Manager at 519-744-6307 ext. 1252 OR by email info@kwcareercompass.org.





The information gathered will be used to help the KW Career Compass Summer Job Skills Builder team to prepare for your learning. This information will be kept private. Applicants can get help to complete this application if needed.

Applicant's Information

First Name:				Last Name:			
Street:				Unit:	Unit:		
City:				Postal Code	Postal Code		
Home Phone #:				Cell #:	Cell #:		
Email Address:	Birthdate:						
How did you hear about the Su	ummer Job Sl	kills Build	ler Program?				
			Info Night at KW Habilitation				
☐ Word of Mouth			☐ Other (describe)				
I will get a ride	□Yes		□No				
I will take the bus	☐ Yes		□No				
Do you have your driver's licer	nse? 🗖 Yes	5	□ No				
Educational Information							
Name of School		Pı	rogram or Diploma Name /OSSD/OSSC			Year	
Have you received any training	g or certificat	ions? (fo	r example, Saf	e Food Handling, Sma	art Serve, WHI	MIS, etc.)	
Type of class or training	Date		Special skills developed		Was this an area of		
	(month/year)				j	nterest?	
					□ yes	□ no	
					□yes	□ no	
Areas of Interest							
Please rate the top 5 jobs you	would like to	do. Orde	er your choice	s (1 being the one you	ı want most a	nd 5 being the one	
you want least):							
General Labour (heavy lift	ing/moving)		Outdo	oor work (grass cuttin	g/weeding)		
				enance (painting/cleaning)			
				n (dishes/food prep)			
Miscellaneous (sign shaking/hostess)			Janitorial (washing floors/windows/sweeping)				
Other (describe):							





Please list any other skills or interests that you have that may be	helpful for us to know.
Please list any information that we need to know to best help yo	u in your learning with us (e.g., support needs,
accommodations).	
Experience Please list the last 2 paid positions, so on's or volunteer jobs you	have had
Please list the last 2 paid positions, co-op's or volunteer jobs you 1. Employer/Organization:	Start Date (dd/mm/yyyy):
In Employer, organization	
	End Date: (dd/mm/yyyy):
Address:	Supervisor:
Phone Number: ()	Title: Can we contact this Employer/Supervisor? □ YES □ NO
Briefly describe duties:	
Were these duties fun? ☐ YES ☐ NO Why or why not?	
2. Employer/Organization:	Start Date (dd/mm/yyyy):
	End Date: (dd/mm/yyyy):
Address:	Supervisor:
	Title:





Phone Number: ()			act this Employer/Supervisor? NO
Briefly describe duties:		1 = -	
Were these duties fun? Why or why not?	P		
		ences. They can be teachers, reli	
summer months.	ob/co-op/volunteer placements	. These people will need to be av	allable for contact during the
	Organization	Contact's Name	Telephone Number
1 2			
this application (unless noted to provide informal I hereby release those in I hereby declare that the	noted otherwise) and I hereby au ation concerning employment, e dividuals or organizations from e information contained in this a ormation should be truthful in or	previous employers, schools, and uthorize my former employers, sc education and/or character. any and all liability and damages pplication is true and complete to rder to best support my goals dur	hools and other organizations for providing such information to the best of my knowledge. I
Ар	plicant Signature		Date
Parent/	Legal Guardian Signature	-	Date
	included with application (pleas	se check)	ngs2 (plansa shask for yes)