



URBAN CIRCLE TRAINING CENTRE INC.

519 Selkirk Avenue, Winnipeg, Manitoba R2W 2M6 • Phone: (204) 589-4433 • Fax: (204) 582-6439

FAMILY SUPPORT WORKER/FASD TRAINING PROGRAM

Funding provided by The Manitoba Government
and certified by Red River College

Note to all applicants: All applications require the following documentation:

- 1 Two (2) current written reference letters from professional/working people who know you (ie. former employer, coworkers, teachers, supervisors, counsellors, volunteer work, etc.).
- 2 A hand written paper telling us why you want to take this program (suitability) and a little about yourself (short autobiography).
- 3 Current (*must be dated no earlier than 6 months prior to program start date*) & acceptable Criminal Record Check with the Vulnerable Sector Search with application. You will also be required to submit a 2nd current criminal record check prior to your practicum work placement which is mandatory by the employer. (\$44.00 at Winnipeg Police Headquarters at 245 Smith Street)
- 4 Current (*must be dated no earlier than 6 months prior to program start date*) & acceptable Child Abuse Registry Check with application. You will also be required to submit a 2nd current child abuse registry check prior to your practicum work placement which is mandatory by the employer. (\$20.00 at 777 Portage Avenue)
- 5 Current (*must be dated no earlier than 6 months prior to program start date*) & acceptable Adult Abuse Registry Check with application. You will also be required to submit a 2nd current child abuse registry check prior to your practicum work placement which is mandatory by the employer. (\$20.00 at 777 Portage Avenue)

1st Application Deadline: Tuesday, September 5, 2017

2nd Application Deadline: Wednesday, November 1, 2017

3rd Application Deadline: Friday, December 1, 2017

Final Application Deadline: Monday, January 8, 2018

Urban Circle will be closed during Winter Holiday from December 22/17 to January 8/18.

PERSONAL

1. Name: _____
 Family (last) First Middle

2. Address: _____ Postal Code: _____

3. Phone: (Home) _____ (Message) _____ 4. SIN#: _____ - _____ - _____

5. Birthdate: ____/____/____ 6. MB Medical# _____ (6 digit#) _____ (9 digit#)
M D Y

7. Friend of Relative through Whom You can be Contacted:
 Name _____ Relationship to you _____ Phone# _____

<p>8. Are you a: Non-parent <input type="checkbox"/> Parent <input type="checkbox"/> Single Parent <input type="checkbox"/></p>	<p>9. a) Are you: Status – Off Reserve <input type="checkbox"/> Status – On Reserve <input type="checkbox"/> First Nations <input type="checkbox"/> Métis <input type="checkbox"/> Métis Non Status <input type="checkbox"/> Inuit <input type="checkbox"/></p>	<p>9. b) Please indicate: BandName: _____ MMF Regional Office _____ Card# _____</p>
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CHILDCARE

10. a) Number of children/dependents _____ Ages of children/dependents _____

10. b) Subsidized childcare arrangements is highly recommended. Please indicate current arrangements:

Name of Subsidized Daycare: _____

Name of Back-Up Babysitter: _____

CRIMINAL RECORD

11. a) Do you have a criminal record? Yes ___ No ___

11. b) Is so, please explain the charge and how long ago _____

****If you have a criminal record, you must obtain the criminal record TRANSCRIPT which outlines all your charges.**** (assistance on how to obtain this information is available)

FUNDING

12. a) Are you currently on Social Assistance? Yes ___ No ___

b) If so, what is your SAMIN Number? _____

c) Workers Name: _____ Office Address: _____

Phone #: _____

d) Have you notified your worker/funding counsellor that you have applied for this program?

Yes ___ No ___

13. Education Training Assessment

a) Have you been referred by your EIA worker to Essential Skills MB? Yes ___ No ___

b) Have you been referred by your EIA worker to Training & Employment Services? Yes ___ No ___

c) Have you been referred by your EIA worker to Pathways Support Unit? Yes ___ No ___

d) If **YES** to any of the above list the contact name and phone#: _____

14. Are you currently employed? Yes ___ No ___

15. a) Are you currently ***ON*** Employment Insurance? Yes ___ No ___

b) If so, when does your EI expire? _____

c) Workers Name: _____ Office Address: _____

Phone #: _____

16. a) Have you applied to your Band, the Council or MB Métis Federation for funding? Yes ___ No ___

b) Counsellors Name: _____ Office Address: _____

Phone #: _____

17. Have you ever been funded by MB Métis Federation in the past? Yes ___ No ___

For what course & when? _____

18. Where did you hear about this program? _____

Name of Course: _____ Course Completed: Yes ___ No ___

EDUCATION (Please list additional education on a separate sheet)

1. What is the HIGHEST grade level of education you have obtained to date? _____ Date: _____
2. Name of Last School Attended: _____
 Address: _____ Date of When Attended: _____
 Name of Teacher(s) and/or Principal: _____
 Name of Course: _____ Course Completed: Yes ___ No ___

EMPLOYMENT HISTORY

1. Most recent employer _____

	Company Name	Address	Phone#
Supervisor	_____	Type of Job	_____
Period of Employment	_____ to _____		
	Month/Year	Month/Year	

 Permission to Contact Supervisor? Yes ___ No ___
 Reason for Leaving: _____

Please list any additional employment on a separate sheet if necessary

VOLUNTEER EXPERIENCE

1. Have you had any experience as a volunteer? If so,
 Where: _____

	Company Name	Address	Phone#
When:	_____ to _____		
	Month/Year	Month/Year	

 Type of Job _____
 Name of Supervisor _____ Phone# _____
 Permission to Contact Supervisor? Yes ___ No ___

All questions are based on funding and selection criteria requirements and have been verified with the Human Rights Commission.

I, (print your name) _____, certify that the statements made by me in this application are true to the best of my knowledge. I also consent to the Family Support Worker Program Staff/Interview Team verifying any information supplied by me (unless otherwise indicated) for the purpose of ensuring my suitability for the program.

SIGNATURE OF APPLICANT: _____ **DATE:** _____

FAMILY SUPPORT WORKER/FASD TRAINING PROGRAM

SELECTION CRITERIA

Urban Circle encourages all people interested in this program to apply. Assistance will be provided to resolve funding and other questions.

- Must be Indigenous descent (First Nations, Treaty, Status, Non-Status, Metis, Inuit, etc.) Able to self-declare on application <page 1> - proof is not required.
- Must be able to demonstrate reliable source of **personal financial support** such as Social Assistance, Employment Insurance, First Nations Band/Council/ Employment & Training, MB Métis Federation, etc. **Personal financial support** must include food, housing, clothing, transportation, childcare (if required), criminal record checks and child abuse checks, etc. (see attached list).
- If you are currently on Employment & Income Assistance - *You are required to immediately inform your worker of applying to the program.* You will be required to meet with our liaison from Industry Training & Employment Services (for those who qualify), who will cover the costs of all your training and personal financial needs. Urban Circle Training Centre will assist you with referring you to our liaison with I.T.E.S.
- If you are **NOT** funded by Employment & Income Assistance, you must apply to a funder for your tuition costs which are **\$8,000.00**. This cost includes all registration and tuition fees, usages of loaned books, modules, supplies and other courses included in the program (ie. CPR, Non-Violent Crisis Intervention, etc.)
- Agreement to **provide** the original, acceptable and current Manitoba Criminal Record search check with Vulnerable Sector Search, a Manitoba Child Abuse Registry check and a Manitoba Adult Abuse check when applying to the program. These documents must be dated no earlier than **6 months prior to program start date**. All students will also be required to submit a **2nd** current, original and acceptable Manitoba Criminal Record check, a Manitoba Child Abuse Registry check and a Manitoba Adult Abuse check prior to the work practicum placement which is requirement mandatory by the employer.
- Must successfully complete a prescribed reading skills test (DRP Assessment) at the required competency level administered on site at Urban Circle Training Centre
- Must be willing and available for shift work and have ability to arrange flexible childcare for employment
- Must demonstrate fluency in both written and spoken English
- Must be in good health
- Having an Indigenous language and/or knowledge of the Indigenous Culture is an asset
- Valid Manitoba Drivers License and access to a vehicle is an asset
- EXPERIENCE – Working with children/being familiar with children is an asset.

FAMILY SUPPORT WORKER/FASD TRAINING PROGRAM

ADDITIONAL FINANCIAL ASSISTANCE

- * Students in the **Family Support Worker/FASD Program** will require confirmation of financial coverage for the following costs:
- subsidized child care coverage (if required)
 - monthly transportation (monthly bus pass, tickets, etc.)
 - Two Criminal Record Search Certificate check costs (\$44.00 each)
You can obtain this at the Winnipeg Police Headquarters at 245 Smith Street
(main entrance off Graham Avenue)
 - Two Child Abuse Registry check costs (\$20.00 each)
You can obtain this at 777 Portage Avenue
 - Two Adult Abuse Registry check costs (\$20.00 each)
You can obtain this at 777 Portage Avenue
 - Optional and highly recommended: to update all immunizations