



REGISTRATION FORM Labour Market Services

Consent to Collect, Use and Release My Information

I consent to the Ministry of the Economy obtaining, using and releasing my personal information to any person, agency, or government agency as may be necessary to support my career or settlement action plan and/or to establish my eligibility for employment or settlement services. I understand that Ministry of the Economy partners include, but are not limited to, the following organizations:

- The Ministry of Social Services, where applicable, to establish or maintain my eligibility for social assistance or related benefits or supplements;
- The Apprenticeship and Trade Certification Commission, where applicable, to support my career plan and my eligibility for career and employment assistance;
- Human Resources and Skills Development Canada and Service Canada to support funding and delivery of career and employment services, and the administration of Employment Insurance-related benefits;
- Citizenship and Immigration Canada to support the funding and delivery of settlement and language programming ;
- Community-based organizations that provide career and employment, settlement and language services to me;
- Indian Bands or Tribal Councils or Aboriginal organizations involved in my career action plan; and
- Schools or training providers involved in my career or settlement action plan.

Client Name: (print) _____

Client Signature: _____ Date: _____

Last Name: _____ First Name: _____

Middle Name: _____

Postal Code: _____ Apt. No. _____ P.O. Box _____

Street Number: _____ Street Name: _____

City: _____ Province: _____

Phone Number(s):

Phone Type	Area Code	Number	Phone Type	Area Code	Number
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Home:	_____	_____	Fax	_____	_____
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Cell:	_____	_____	Messages	_____	_____
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Business:	_____	_____			
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Email: _____

Birth Date: _____
day month (ie. Jan.) year

Gender : Male Female

Social Insurance Number: _____

What is your highest level of education? _____ (i.e., Elementary Grade; GED 12; ABE Grade; Post Sec level; etc)