



BEAHR

Building Environmental Aboriginal
Human Resources

Développement des ressources
humaines autochtones en environnement

Internship Program Participant Application Form

Please fax to (403) 269-9544

Candidate Information

Family Name	Given Name	Date of Birth ____/____/____ year month day	Social Insurance Number
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Are you a Canadian citizen or landed immigrant? Yes No
 Do you hold a valid Canadian passport? Yes No
 Which official language do you wish to use? English French

CURRENT ADDRESS:	PERMANENT ADDRESS (i.e. that of a parent/ relative):
Street _____	Street _____
City _____	City _____
Prov. _____ Postal code _____	Prov. _____ Postal code _____
Phone () _____	Phone () _____
e-mail _____	2 nd e-mail _____

Applicant Education/ Skill Information

Degree / Diploma (e.g. B.Sc.) – begin with most recent	Date obtained	Field of study (e.g. Chemistry)	Name of institution and province it is in:
1 _____	1 ____ / ____	1 _____	1 _____ -- _____
2 _____	2 ____ / ____ month year	2 _____	2 _____ -- _____

Job Skills: (Please list your top four skills that would be most applicable to a potential employer – i.e. relevant course/ work experience such as, Site Remediation or Hydrology) 1 _____ 2 _____ 3 _____ 4 _____	Computer Skills: 1 _____ 2 _____ 3 _____ 4 _____	Language Skills: English 0 (none) 1 2 3 4 5 (excellent) French 0 (none) 1 2 3 4 5 (excellent) Other: _____
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Eligibility Questions

Listed below are essential questions in order to determine your suitability for the internship program.

- Has a Canadian environmental company or other organisation already expressed interest in creating an internship for you? Yes No
If yes, what is the organisation's name, phone number and contact person?
- Have you participated in any other government youth employment/education programs? Yes No
If yes, what is the name of the program and the funding source of the program? (i.e. Science Horizons – Env. Canada)
Name: _____ Funding Source: _____ Date: _____
- At the time of application to the program the candidate is eligible for fulltime employment (i.e. not returning to school). Yes No
- At the time of application to the program the candidate is underemployed or unemployed Yes No
- Is it your intention to obtain a permanent position in the environment industry? Yes No
- Do you have any special requirements or restrictions for travel or employment? Yes No
- Do you have any medical condition that would endanger you in working on environmental projects? Yes No
- Please check the response(s) you feel best applies to you:
 Woman Aboriginal Person Visible Minority Person with Disabilities
 specify: Inuit, First Nations (on-reserve, off-reserve), or Métis

Statement of Verification

I hereby declare that all of the information contained within this application package is, to the best of my knowledge, correct and that if found to be otherwise, I agree to withdraw my candidature and participation from the internship program.

Date: _____ Signature: _____