

# Sylvan Lake Youth Employment Centre

4725-43<sup>rd</sup> Street

Phone: 403-887-1137 - Fax: 403-887-1194 - Email: [youthservices@sylvanlake.ca](mailto:youthservices@sylvanlake.ca)

## Registration Form

Date: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Age: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_

**Do you have a Social Insurance Number?**      Yes      No

**Do you have valid drivers license?**      Yes      No

**Are you attending school?**      Yes      No

**What school?** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Special Skills or Interests you would like to highlight? (computer experience, first aid, certificates, training, etc...)**

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**When are you available to work?**

Monday \_\_\_\_\_ Hours \_\_\_\_\_

Tuesday \_\_\_\_\_ Hours \_\_\_\_\_

Wednesday \_\_\_\_\_ Hours \_\_\_\_\_

Thursday \_\_\_\_\_ Hours \_\_\_\_\_

Friday \_\_\_\_\_ Hours \_\_\_\_\_

Saturday \_\_\_\_\_ Hours \_\_\_\_\_

Sunday \_\_\_\_\_ Hours \_\_\_\_\_

**Are you looking for Full, Part Time or**

**Casual?**

\_\_\_ Full Time

\_\_\_ Part Time

\_\_\_ Casual

**Are you interested in Volunteer work?**

\_\_\_ Yes

\_\_\_ No

**Office Use Only**

**Date:** \_\_\_\_\_

Placement: \_\_\_\_\_

**Notes:**

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**Date:** \_\_\_\_\_

Placement: \_\_\_\_\_

**Notes:**

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