



# EMPLOYMENT READINESS INFORMATION QUESTIONNAIRE

To help you in your job search, we need to learn about you, your work history and your job search skills. Please answer the following questions as best you can. The information you provide will be used to see how we can assist you to get work. You are encouraged to access Employment Program of British Columbia services available at the WorkBC Employment Services Centre serving your community at: [http://www.workbc.ca/workbccentres/interactive\\_map.htm](http://www.workbc.ca/workbccentres/interactive_map.htm)

## My Personal Information

First Name	Middle Name	Last Name
Social Insurance Number	Date of Birth (YYYY MM DD)	<input type="checkbox"/> Male <input type="checkbox"/> Female
Address	City / Town	Postal Code
Telephone	Email Address	

## My Employment Skills and Strengths

To identify some of your employment skills and strengths, please answer the following questions as well as you can.

<b>Reading and understanding written information</b>	<input type="checkbox"/> I am good at this	<input type="checkbox"/> I am okay at this	<input type="checkbox"/> I struggle with this
<b>Explaining and describing things to others</b>	<input type="checkbox"/> I am good at this	<input type="checkbox"/> I am okay at this	<input type="checkbox"/> I struggle with this
<b>Creating and working with documents</b>	<input type="checkbox"/> I am good at this	<input type="checkbox"/> I am okay at this	<input type="checkbox"/> I struggle with this
<b>Writing and organizing information</b>	<input type="checkbox"/> I am good at this	<input type="checkbox"/> I am okay at this	<input type="checkbox"/> I struggle with this
<b>Working with numbers and math</b>	<input type="checkbox"/> I am good at this	<input type="checkbox"/> I am okay at this	<input type="checkbox"/> I struggle with this
<b>Solving problems and finding answers</b>	<input type="checkbox"/> I am good at this	<input type="checkbox"/> I am okay at this	<input type="checkbox"/> I struggle with this
<b>Getting along with others</b>	<input type="checkbox"/> I am good at this	<input type="checkbox"/> I am okay at this	<input type="checkbox"/> I struggle with this
<b>Using computers for common tasks</b>	<input type="checkbox"/> I am good at this	<input type="checkbox"/> I am okay at this	<input type="checkbox"/> I struggle with this
<b>Learning and trying new things</b>	<input type="checkbox"/> I am good at this	<input type="checkbox"/> I am okay at this	<input type="checkbox"/> I struggle with this

## My Recent Employment

**Currently, are you** (select all that apply)

- Unemployed  Working less than 20 hrs/wk  Working 20 or more hrs/wk  A full-time student  At risk of losing my job

**If currently unemployed or your employment has changed, what reason(s) apply to you** (select all that apply)

- I was laid off from my last job  I quit my last job  I was fired from my last job  
 I held a temporary job (less than 6 months)  I left work for medical reasons  I retired from my last job  
 I was self-employed and cannot get enough work  I am new to Canada  I was in jail  
 I was home caring for children or family  I moved  I returned to school  
 Other (please describe): \_\_\_\_\_

**Which of the following best describes your recent work history?** (select all that apply)

- I am looking for my first job in Canada  I have recently worked full-time (30 or more hours per week)  
 I have never worked  I have recently worked part-time (less than 30 hours per week)  
 I have recently worked as a volunteer  I have recently worked in my own business (self employment)  
 Other (please describe): \_\_\_\_\_

## Other Factors That May Affect My Employment

**Do any of the following affect you in finding or keeping a job?** (select all that apply to you)

- Lack of child or family care  Lack of required tools or clothing  Difficulty coping  
 Lack of skills or qualifications  Disability (physical or learning)  Struggle with addictions  
 Other (explain): \_\_\_\_\_

## My Assistance Information

Not counting this application, how many times have you been on income assistance anywhere in Canada in the past 3 years?

- Never     1-3 times     More than 3 times

How much total time have you spent on income assistance (IA) in the past 3 years?

- Less than 2 months     2 - 12 months     More than 12 months     Not in the past 3 years     I have never received IA

Are you receiving any employment services or supports or other services from another organization(s)?

- No     Employment services or supports     Financial services or supports (describe)

- Other community services or supports (describe):

## My Readiness to Work

Do you have the skills you need to get and keep a job?     Yes     I have some of the skills     No     Not sure

Do you know how and where to look for work?     Yes     I have a general idea     No     Not sure

Do you know what type of work you are looking for?     Yes     I have a general idea     No     Not sure

↳ If so, are there available work opportunities in your type of work?     Yes     Some     Hardly any     No     Not sure

Do you do well in job interviews?     Yes     Somewhat     No     Not sure

Do you have an up-to-date resume?     Yes     My resume needs some work     I don't have a resume

Do you have employer references that will help you to get a job?     Yes     No     Not sure

## My Education and Language Information

What is the highest level of schooling that you have completed? (select the best response)

- Less than grade 10     Some post-secondary / entry trades training     Trades training (3rd or 4th year apprentice)  
 Some high school (grades 10-12)     Post-secondary certificate / 1st yr apprentice     Trades certification (Journey Person)  
 Grade 12 graduation, GED or equivalent     Post secondary diploma / 2nd yr apprentice     Post-secondary degree

What is the main language that you speak and understand? (select the best response)

- English     French     Other (please identify language):

Do you have the English skills to get and keep a job?     Yes     I could use some English training     No

## Privacy and Access to Information

Personal information collected on this form is authorized under section 26(c) of the *Freedom of Information and Protection of Privacy Act* and will be used by the Ministry of Social Development and Social Innovation to administer the *Employment and Assistance Act* and the *Employment and Assistance for Persons With Disabilities Act*, and may be used by service providers to administer the Employment Program of British Columbia, as well as by the Department of Human Resources and Skills Development Canada or the Canada Employment Insurance Commission to administer the *Employment Insurance Act* and could impact your receipt of Employment Insurance benefits and may be used for policy analysis, research or evaluation purposes. If you have any specific questions concerning the collection of personal information, please contact your local Employment and Assistance Office.

Contact Name

Contact Title

Contact Phone

## Declaration

I declare that:

- (a) I have read and understood the information provided in this Employment Readiness Information Questionnaire; and  
 (b) the information I have provided in this Employment Readiness Information Questionnaire is true, accurate and complete in every respect.

Signature

Date Signed