SHIFT FORWARD

PARTICIPANT APPLICATION FORM

AUTOMOTIVE Sector Council of Nova Scotia | GEARUP
AUTOCOUNCIL.CA | (902) 464-0168

APPLICANT INFORMATION

Full Name: _____

Phone No.: _____ Email: _____

Current Community (Town/City): _____

ELIGIBILITY SCREENING

What is your age?: ☐ 17 ☐ 18-20 ☐ 21-24 ☐ 25+

Are you enrolled in high school? ☐ Yes ☐ No

If yes, are you in Grade 12? ☐ Yes ☐ No

What is your current education status?

☐ Left high school before graduating ☐ High school graduate ☐ Some post-secondary

☐ Other _____

EMPLOYMENT STATUS

What is your current employment situation?

☐ Unemployed ☐ Underemployed ☐ Employed full-time ☐ Other _____

IDENTITY & COMMUNITY

Do you identify as a member of the African Nova Scotian / Black community?

☐ Yes ☐ No ☐ Prefer not to say

EXPERIENCE & AWARENESS

Have you had any experience in the automotive or trades industry?

☐ Yes ☐ No

If yes, please describe: _____

Before today, had you heard of the Motive Power Trades?

☐ Yes ☐ No

If yes, what does it mean to you?: _____

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INTEREST & READINESS

What interests you about working in the automotive or motive power trades?

Are you interested in hands-on training and paid work placements?

☐ Yes ☐ No ☐ Maybe

Do you have reliable transportation or ability to get to work?

☐ Yes ☐ No ☐ Sometimes

What supports would help you succeed?

☐ Transportation ☐ Work gear ☐ Mentorship ☐ Flexible schedule

☐ Other _____

CONFIRMATION

Is there anything else you would like us to know?

DECLARATION

I confirm that all information provided above is true and accurate to the best of my knowledge.

Signature: _____

Date: _____

AUTOMOTIVE Sector Council of Nova Scotia | GEARUP

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