



Referral Form

WarehouseAbilities is a 12-week training program designed to address employment barriers faced by people facing multiple barriers to employment. Participants will get prepared for sustainable employment in the high-demand warehousing sector. The program includes Fundamental Warehouse Operations training through the Universal Learning Institute, as well as hands-on work simulation in a real-life warehouse setting, key certifications, supported job search, and more...

CANDIDATE DETAILS			
First Name:		Middle Name:	
Last Name:		Preferred Name:	
Phone:		Email:	
<i>I consent for a representative from Back in Motion's WarehouseAbilities to contact the person mentioned below, as it relates to my eligibility and participation in this program.</i>			
Signature:			
REFERRER INFORMATION			
Agency:		Agency Contact:	
Contact Phone:		Contact Email:	
ADDITIONAL CANDIDATE INFORMATION			
How did you find out about WarehouseAbilities?			
Are you currently employed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Are you looking for a job?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Are you legally entitled to work in Canada?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Are you currently attending School?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Do you identify as having a disability?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Do you have access to a computer or laptop?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Do you have access to Internet?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Are you a:	COMMENTS		
<input type="checkbox"/> Canadian Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Protected Person/Refugee <input type="checkbox"/> Other:			

Please send completed form to Back in Motion WarehouseAbilities at info@warehouseabilities.ca