

Service Registration **Intake** Form

Nova Scotia School for Adult Learning (NSSAL)
NSCC, adult high schools and Université Sainte-Anne

Person Information

Title: Mr. Mrs. Ms. Miss

Last name:

Middle initial:

Birth date:

Home phone number:

Mobile phone number:

Email address:

SIN:

First name:

Gender:

- Male Female
 Other/X Prefer not to report

Marital status:

- Common-Law Divorced
 Married Single
 Separated Widowed
 Other Prefer not to report

Other Language:

- English French

Service language:

- English French

Mailing Address

Care of:

Street address:

City:

Country:

Province:

Postal/Zip code:

Civic Address (if different than mailing address):

Street address:

City:

Country:

Province:

Postal/Zip code:

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Additional Information:

Intake - How many dependents do you have?

Intake - Is your current job unstable or insecure? (Choose One)

- Yes No
 Prefer not to Report

Intake – Receiving EI Benefits (Choose One)

- Yes No
 Prefer not to Report

Intake – Received EI Benefits in the last 5 Yrs (Choose One)

- Yes No
 Prefer not to Report

Intake – Earned \$2K or more in at least 5 of the previous 10 Yrs (Choose One)

- Yes No
 Prefer not to Report

Designated Group - Aboriginal Identity (Choose One)

- Yes No
 Prefer not to Report

Designated Group - Immigrant (Choose One)

- Yes No
 Prefer not to Report

Designated Group - Immigration Year

Designated Group - Persons with Disabilities (Choose One)

- Yes No
 Prefer not to Report

Designated Group – African Nova Scotian (Choose One)

- Yes No
 Prefer not to Report

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Designated Group - Francophone / Acadian (Choose One)

- Yes No
 Prefer not to Report

Designated Group - Visible Minority (Choose One)

- Yes No
 Prefer not to Report

Pre-Intervention - Employment Status (Choose One)

- About to be Unemployed Employed
 Self Employed Unemployed
 Unknown Not in the labour force

Pre-Intervention - Education Level (Choose One)

- | | |
|---|---|
| <input type="checkbox"/> Less than Grade 6 Complete | <input type="checkbox"/> Less than Grade 9 Complete |
| <input type="checkbox"/> Less than Grade 11 Complete | <input type="checkbox"/> Completed Grade 11 |
| <input type="checkbox"/> Some Grade 12 | <input type="checkbox"/> High School Diploma |
| <input type="checkbox"/> High School Equivalent | <input type="checkbox"/> Trade/Apprenticeship Incomplete |
| <input type="checkbox"/> Non-University Incomplete | <input type="checkbox"/> Trade/Apprenticeship Complete |
| <input type="checkbox"/> University Certificate / Diploma | <input type="checkbox"/> Non-University Certificate / Diploma |
| <input type="checkbox"/> University Incomplete | <input type="checkbox"/> University Degree |
| <input type="checkbox"/> Master's Degree | <input type="checkbox"/> PhD (Doctorate) |
| <input type="checkbox"/> Other | <input type="checkbox"/> Prefer not to report |

Pre-Intervention - Education Level Comment

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Pre-Intervention – Primary Training Reason (Choose One)

- | | |
|--|--|
| <input type="checkbox"/> Obtain additional High School credits | <input type="checkbox"/> Obtain High School Diploma |
| <input type="checkbox"/> Improve digital skills | <input type="checkbox"/> Improve math skills |
| <input type="checkbox"/> Improve other essential skills | <input type="checkbox"/> Improve reading/writing skills |
| <input type="checkbox"/> Prepare for GED | <input type="checkbox"/> Prepare for High School diploma |
| <input type="checkbox"/> Prepare for Post-Secondary | <input type="checkbox"/> Improve Skills |
| <input type="checkbox"/> Help with Work at another School | <input type="checkbox"/> Help with apprenticeship Course |
| <input type="checkbox"/> Prepare for an entrance exam | <input type="checkbox"/> Prepare for Employment |
| <input type="checkbox"/> Personal satisfaction | <input type="checkbox"/> No specific goal |
| <input type="checkbox"/> Other | |

Pre-Intervention - Years Since Public School (Choose One)

- | | |
|---|---|
| <input type="checkbox"/> Less than 1 year | <input type="checkbox"/> 1 to 5 Years |
| <input type="checkbox"/> 6 to 10 years | <input type="checkbox"/> 11 to 20 years |
| <input type="checkbox"/> More than 20 years | <input type="checkbox"/> Not sure |

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COLLECTION, USE, & DISCLOSURE OF PERSONAL INFORMATION

The Nova Scotia Government Labour Market Programs provided by the Departments of Labour, Skills and Immigration, Community Services, and the Office of Immigration, are bound by the principles and requirements of the Nova Scotia Freedom of Information and Protection of Privacy (FOIPOP) Act. The FOIPOP Act defines the meaning of personal information; in addition to the information defined by the Act, other types of personal information may include: date of birth, Internet Protocol address, e-mail address, or other information collected by our programs or services.

The personal information collected will only be used and disclosed in keeping with the access and privacy provisions of the Nova Scotia FOIPOP Act and the Nova Scotia Personal Information International Disclosure Protection (PIIDPA) Act. Any personal information collected during the course of accessing our programs or using our services is used only for providing you with services; for example, for registration to our programs or for determining your eligibility to services etc.

We do not disclose your personal information to other organizations or individuals except as required to fulfill the purpose(s) of the program or service and only to the extent required or authorized by law.

Some functions within these programs or services are provided by service providers external to the department(s). All external service providers that provide you with services on our behalf must comply with our privacy requirements and must meet the applicable security, privacy and terms of use provisions.

Under the privacy provisions of the FOIPOP Act individuals have the right to correction of, and access to, their personal information. To obtain access or request correction of your personal information please contact the Information Access and Privacy Services unit by email at IAPServices@novascotia.ca or phone (902) 424-2985 or 1-844-424-2985.

I acknowledge that I have read and understand the above information regarding the collection, use, and disclosure of my personal information:

Client name [print]

Client signature

Date

Witness signature

Date