



OTTER CLIENT APPLICATION FOR FUNDING

Contact Information:

Name: _____
 Address: _____
 Phone: _____ Email: _____
 SIN: _____ Date of Birth: _____

Program Applying For:

Training Purchase Training Allowance Targeted Wage Subsidy

Previous Use of OTTER Programs:

Date	Project Name	Outcome

Occupation Name: _____

- a. What is the NOC number for the occupation listed above? _____
- b. What is the Skill Level for this occupation? _____

Name three (3) other similar occupations:

What skills and employment requirements are needed for this occupation?

Specific Skills	Essential Skills	Employment Regulations

Are any of the following required for your chosen occupation:

Medical Reliable Transportation Drivers Licence CPIC

What is the future outlook for this occupation? Good Fair/Average Limited

What are the working conditions for this type of employment?

What is the salary range for this occupation?

Minimum _____ Average _____ Maximum _____

List two (2) advantages and two (2) disadvantages of this occupation:

- 1. _____ 1. _____
- 2. _____ 2. _____

Employer Research

Call three (3) employers where you might find work. Explain to them you are completing research for funding and have a few questions.

- 1. Name of Employer: _____ Contact Person: _____
 - a. Would you hire a graduate from (your program name)? Yes No
 - If No, what type of programs do you recommend? _____
 - b. What is the normal salary range for an entry level position in this field? _____

2. Name of Employer: _____ Contact Person: _____
 a. Would you hire a graduate from (your program name)? Yes No
 If No, what type of programs do you recommend? _____
 b. What is the normal salary range for an entry level position in this field? _____

3. Name of Employer: _____ Contact Person: _____
 a. Would you hire a graduate from (your program name)? Yes No
 If No, what type of programs do you recommend? _____
 b. What is the normal salary range for an entry level position in this field? _____

Answer the following question to get an overview of education requirements:

- a. What is the name of the program you are interested in:
- b. What are the names of three (3) schools that offer this program and list the length of program and the prerequisites (requirements) ?

Name of School	Length of Program	Prerequisites

Choose the school you are most interested in and provide the following info:

Start Date: _____ Costs of Program:
 End Date: _____ Tuition: _____
 Books: _____
 Have you received an acceptance letter from the institution? Yes No Uniforms: _____
 (If yes, please include a copy) Other: _____

If this is the occupation you are most interested in, attach 5 to 10 job postings to this.

Please attach letter requesting the funds and why this if the best career path for yourself.

Please include an updated resume.

I certify that the above information is accurate and true to the best of my knowledge. If funding is approved, I will adhere to OTTER program policy guidelines. Failure to do so or knowingly providing false information will result in funding (if approved) being revoked.

Client Name: (Print): _____

Client Signature: _____

Date: _____