



WE-WIL: Women Empowering Women into Leadership

Application Form

Please print clearly. Your answers will determine your eligibility and will be kept strictly confidential. Application deadline is **Aug 14th, 2017.**

Only applicants being selected for an interview will be contacted.

Name: _____ Address: _____

City: _____ Province: _____ Postal Code: _____

Home phone: _____ Email: _____

If no phone, where can we leave a message: _____

Date of Birth: _____ Country of birth: _____

Language spoken: _____

1. Are you employed? No _____ Causal _____ Part-time _____ Full-time _____

Name of employer _____

2. If not, what is your source of income?

() EIA

() Disability benefit

() Pension

() EI

() Workers Compensation

() Other _____

3. Do you identify as having a disability? Yes _____ No _____ Prefer not to answer _____

If yes, how do you define your disability _____

4. How did you hear about the WE-WIL program?



5. Why are you interested in taking this program?

4. How would you describe your housing?

- Own house
- A house/ apartment where my name is on the lease (Permanent)
- Subsidized unit
- Couch surfing
- Homeless/ Shelter
- On the street

5. What is the highest level of schooling you have finished?

- Some middle school
- Completed grade 9
- Completed grade 10
- Completed grade 11
- Completed high school (grade 12)
- GED/ High School Equivalency
- Completed some post-secondary courses
- College diploma/certificate
- Trades/ technology/ apprenticeship
- University degree
- Graduate school

Have you been referred by an organization? Yes ____ No ____

Organization's name _____ Contact Name _____

Phone _____ Email _____

Signature of applicant _____ Date _____

Please return to:

Chelsea King, Mentorship Coordinator

West Central Women's Resource Centre- 640 Ellice Ave, WPG MB R3G 0A7

community@wcwrc.ca

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