



HEU SCREENER RETRAINING FUND

APPLICATION FORM

SECTION A: ELIGIBILITY

1. Have you ever worked as an ambassador, screener or greeter? YES/ NO _____
2. Did you do this job in the public or private sector? PUBLIC/ PRIVATE _____
3. If you were an ambassador, screener or greeter in both the private and public sectors,
Where did you work the majority of your hours? PUBLIC/ PRIVATE _____
4. Did you work in this role anytime between September 2024 and April 2025?
YES/NO _____
5. Have you completed your probation period? (488 hours) YES/ NO _____

SECTION B: EMPLOYEE INFORMATION

1. Last Name _____ 2. First Name & Initial(s) _____
3. Address _____
5. City/Town _____ 6. Province _____
7. Postal Code _____
8. Home Phone Number _____
9. Cell Phone Number _____
10. Personal Email Address _____
11. Employee Number _____
12. Employer at the Time of Layoff _____
13. Layoff Worksite _____
14. Employment Status (Regular FT/Regular PT/Casual) _____

SECTION C: COURSE/PROGRAM INFORMATION

1. Name of School _____ 2. Location _____
3. Course Name(s)/Program and Number(s) _____

4. Course/Program Hours per Week _____
5. Course/Program Start Date (yyyy/mm/day) _____
6. Course End Date (yyyy/mm/day) _____
7. Registration Confirmed? YES/ NO _____
8. Are you on a waitlist? _____ Projected Start Date? _____

SECTION D: CONFIRMATION OF CURRENT EMPLOYEE STATUS

1. Name of Employer _____
2. Job title _____ 3. Site _____
4. Employment Status (Regular FT/ Regular PT/ Casual) _____
5. Current FTE (1.0, 0.5, 0.8, etc.) _____

COLLECTION, USE AND DISCLOSURE OF PERSONAL INFORMATION

Except as otherwise stated, personal information collected in this application form and related documents will be used to determine the applicant's eligibility for funding from the HEU Screener Retraining Fund.

Except as otherwise stated, personal information collected may also be disclosed to third parties (including relevant educational institutions for the following purposes:

- to verify and/or investigate the accuracy of the information provided by the applicant.
- to administer any funds awarded to the applicant.

Personal information collected may also be converted into non-identifiable or aggregate form for statistical reporting purposes – for example, to report on the number of applications received from members of an equity group (e.g., young workers); to report on the various types of study or training funded; etc.

Signature of Applicant: _____

Print Name: _____

Date Signed: _____

ATTACHMENT CHECKLIST

MAKE SURE THAT YOU INCLUDE THESE DOCUMENTS IN YOUR EMAIL. (You may submit your application without the following documents for conditional approval. Please submit documents as they become available for final approval.)

Confirmation of course registration and confirmed start date attached (for programs with registration deadlines).

Completed Employee Status Form attached (Layoff notice)

Application form completed and signed.

SUBMIT YOUR APPLICATION FORM VIA EMAIL OR REGULAR MAIL

Email: eoafinfo@heu.org

MAIL: HEU Screener Retraining Fund c/o 5000 North Fraser Way Burnaby, B.C.

V5J 5M3

IF YOU HAVE QUESTIONS, YOU CAN CONTACT THE EOAF TEAM AT:

Email: eoafinfo@heu.org

Phone: 672 727 0286