



Employer Research

In this section you will be contacting **employers** for their opinion on your proposed training and on their hiring practices. For clients seeking Community Futures Treaty Seven funding.
Your employment Counsellor may call to verify this information.

Employer: _____ Contact Name: _____
 Address: _____ City _____ Prov. _____
 Position: _____ Phone: ____/____ - _____ Starting Wage: \$ _____
 How many people do they hire in this occupation per year: _____
 What do employers say about your proposed training? _____

Office Use: Confirmed Information YES ___ NO ___ Counselor's Initial _____ Date: _____

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Information that is collected from you is done so under the authority of the Aboriginal Skills Employment & Training Strategy (ASETS) and is in accordance and governed by the Protection of Personal Information Act (PIPA) and Freedom of Information and Protection of Privacy Act (FOIP).