

Please note:

Before completing the enrolment application form, be sure to read the application guide to find out about workplace skills development strategies and programs, and their requirements. This will help you complete the application form correctly.

Section 1 – Applicant identity

Last name and first name													
Social insurance number		Date of birth Year Month Day			Sex <input type="checkbox"/> Male <input type="checkbox"/> Female		Preferred language of correspondence <input type="checkbox"/> French <input type="checkbox"/> English		E-mail				
Home address	Number		Street, range road or P.O. box					Apartment					
	Municipality									Postal code			
	Province					Country							
Home telephone	Area code		Number		Work telephone	Area code		Number	Extension	Cellphone	Area code		Number

Section 2 – Program information

Indicate the name of the program in which you wish to enrol and the corresponding code. To do so, please read the application guide. *Please complete a separate form for each program.*

Program name

Program code

Type of application

Enrolment in a program

Certificate of qualification from Emploi-Québec expired more than six years ago

Recognition of skills

Recognition of training credentials under a mutual recognition arrangement with France

Recognition of skills under an interprovincial agreement on manpower mobility with Ontario

Recognition of skills under the Pan-Canadian Agreement on Internal Trade

Section 3 – Employer information

Are you currently studying in the field for which you are filing this enrolment application?

Yes No If “Yes,” skip to section 4.

Business name

Québec business number (NEQ)

Business address

Number Street, range road or P.O. box Apartment

Municipality Postal code Web site

Telephone

Area code Number Extension Fax Area code Number E-mail

Business representative

First and last name of qualified worker (or journey person)

Is the business unionized? Yes No

Section 4 – Information about the applicant’s training and experience

Training

Have you taken any pertinent training courses related to the qualification program in which you wish to enrol? Yes No

If “Yes,”

– Please give the names of the courses that you have taken and the names of any diplomas, attestations or certificates obtained:

– Please attach a legible photocopy of each transcript (statement of grades), diploma, attestation or certificate. In the case of a diploma issued by the Ministère de l’Éducation nationale de France, enclose a certified true copy (see definition in the Information Guide).

Certificates of qualification

Do you hold any occupational (vocational) qualification certificates? Yes No

If “Yes,”

– Please indicate the title of each certificate:

– Please attach a legible photocopy of each diploma, attestation or certificate.

Confirmation of employment

Do you have pertinent work experience related to the program in which you wish to enrol? Yes No

If “Yes,” please attach a confirmation from an employer for each pertinent work experience related to the program indicated in section 2.

Section 5 – Fee

Fee payable: \$

Please check the means of payment: Cheque
 Money order

Your cheque or money order must be made out to the Minister of Finance of Québec.

Section 6 – Signature of applicant

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Date

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Signature

Section 7 – Authorization to disclose information

I authorize my current employer and previous employers to disclose information from my employment or vocational training file. If I have declared any acquired or recognized experience, training or qualification, **I also authorize** my current employer, my previous employers and the pertinent training and apprenticeship organizations to disclose information from my file.

I am aware that if I enrol in an interprovincial qualification examination, Emploi-Québec will disclose information from my apprenticeship and examination file to Canadian organizations within the management framework for the Interprovincial Standards Red Seal Program.

I am also aware that the information contained in this form will be entered into the Interprovincial Computerized Examinations Management System (ICEMS) and that some of this information will be disclosed to Statistics Canada, in compliance with the *Statistics Act*.

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Date

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Signature of applicant