

International Youth Internship Program

Participant Information

Instructions

The information collected by CIDA in this form will be used for evaluation, statistical and security purposes. We ask that you complete and return this form before your departure. The information that you will provide is very important for your own safety (in the case of an evacuation for example).

The information collected may be disclosed to Human Resources and Skills Development Canada (HRSDC) to determine your eligibility for the Youth Employment Strategy (YES) program and for subsequent evaluation and accountability purposes. HRSDC, on behalf of the Government of Canada, is responsible for the evaluation of the YES program in order to ascertain how beneficial the programs are to YES participants. Your help in providing accurate information is essential for HRSDC to evaluate the program and conduct participant surveys to ensure that the YES programs meet your needs.

The information you provide is collected, and will be administered and disclosed under the authority and in compliance with the *Privacy Act* and other applicable privacy laws. No administrative decisions will be made about you based on the information provided to CIDA, and no such decisions will be made on the basis of any information that may be disclosed to HRSDC. Completion of this form is voluntary; however, failure to do so may make it difficult for CIDA to use all the means at its disposal to ensure your safety abroad, which may jeopardize your admission to the International Youth Internships Program (IYIP). Furthermore, it may have a negative impact on your eligibility for the YES program and will negatively impact on the evaluation of the YES program by HRSDC. In order to conduct the evaluation activities, information from other sources (e.g. Canada Revenue Agency for income level) may be linked with this data.

You have the right to the protection of, and access to, your personal information. The information provided will be kept in a secure IYIP database and the forms kept in the IYIP file at CIDA. The information disclosed to HRSDC will be retained in Personal Information Bank HRSDC PPU 450, entitled Evaluation and Data Development. Instructions for obtaining this information are outlined in the government publication, entitled Info Source, a copy of which is located at all Human Resources Centres. Info Source is also available at the following Web site address, <http://infosource.gc.ca>.

Eligibility Criteria

If you are a Canadian citizen or permanent resident between the ages of 19 and 30, with six months free to devote to an internship, you have passed the first eligibility test! Congratulations!

You must be:

- ♦ a post-secondary graduate; that is, a graduate of a degree or diploma program in a university, college, post-secondary school of technology, post-secondary institute or a CEGEP (college d'enseignement général et professionnel, Québec);
- ♦ out of school (that is, you must not have courses, co-op terms or theses left to complete to satisfy your current degree requirements);
- ♦ ready to begin your professional career;
- ♦ unemployed or underemployed; and
- ♦ legally entitled to work in Canada.

However, you are not eligible if you have had a previous paid, career-related international work experience or if you have participated in a YES international internship program in the past. (Please note that priority will be given to applicants who have not participated in a YES science and technology internship or in an internship within the Career Focus stream of YES.)

Return completed form to sponsor organization

CIDA 2000 (2006-06)



Canadian International
Development Agency

Agence canadienne de
développement international

Canada

(IMPORTANT: to be completed before your departure)

| PART A — PROJECT INFORMATION (to be completed by project co-ordinator) | | | | |
|--|---|--|---------------|--|
| 1 Name of sponsor organization (contribution recipient) | | | 2 File number | |
| 3 Program/Activity YES - Career Focus | 4 Start date of the internship YYYY- MM - DD | 5 Anticipated finish date YYYY- MM - DD | | |

| PART B — PARTICIPANT INFORMATION (to be completed by the participant) | | | | |
|--|---|--|---------|---|
| 6 Family name | | 7 Given name and initial | | 8 |
| 9 Permanent address (No., Street, Apt:) | | | 10 City | |
| 11 Province | 12 Postal code | You are from <input type="checkbox"/> an urban area <input type="checkbox"/> a rural area | | 13 Telephone no. () |
| 14 Are you currently in receipt of employment insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| 15 Date of birth YYYY- MM - DD | 16 Employment status at start of internship <input type="checkbox"/> Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Student | | | |
| 17 Residency status <input type="checkbox"/> Canadian citizen <input type="checkbox"/> Permanent resident <input type="checkbox"/> Refugee under the <i>Immigration and Refugee Protection Act</i> <input type="checkbox"/> Other | | | | |
| 18 Highest level of education completed <input type="checkbox"/> Post-secondary education other than university (college/CEGEP) <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> Master's or PhD incomplete <input type="checkbox"/> Master's or PhD Field of study ▶ | | | | |
| 19 Do you meet the eligibility criteria outlined on the instructions page? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| 20 First official language <input type="checkbox"/> English <input type="checkbox"/> French | | 21 Language spoken <input type="checkbox"/> English <input type="checkbox"/> French <input type="checkbox"/> Both | | 22 Language written <input type="checkbox"/> English <input type="checkbox"/> French <input type="checkbox"/> Both |
| 23 Language preference <input type="checkbox"/> English <input type="checkbox"/> French | | | | |

The Federal Government is committed to equity in employment. You are encouraged to complete the following voluntary questions and indicate if you are a member of any of these groups.

| | | | | |
|--|---|---|--|--|
| 24 Gender <input type="checkbox"/> Male <input type="checkbox"/> Female | 25 Member of a visible minority <input type="checkbox"/> Yes <input type="checkbox"/> No | 26 Person with disability <input type="checkbox"/> Yes <input type="checkbox"/> No | 27 Aboriginal group <input type="checkbox"/> Registered on-reserve <input type="checkbox"/> Registered off-reserve <input type="checkbox"/> Non-status <input type="checkbox"/> Métis <input type="checkbox"/> Inuit | |
|--|---|---|--|--|

The information below will not be provided to HRSDC, but is required by CIDA for emergency purposes and may be used for research and evaluation purposes.

| Overseas address | | | | |
|-----------------------------|-----------|------|--|---------|
| Address (No., Street, Apt:) | | City | Province | Country |
| Postal code | Telephone | Fax | Personal e-mail address (Required to reach you in case of emergency while you are overseas) | |

To promote networking opportunities among interns overseas, CIDA may share your overseas address with other professionals, unless you disagree: I disagree

PARTICIPANT DECLARATION AND CONSENT TO RELEASE INFORMATION

I _____ (name of participant), the undersigned, certify that I have not participated in an international internship within the Career Focus stream of the Government of Canada's Youth Employment Strategy (YES). I also certify that all the information provided on this form is accurate. I consent to CIDA collecting this information and to the release of this information to HRSDC. I acknowledge that the information is collected and administered in accordance with the *Privacy Act* and applicable privacy laws. I also acknowledge that the information collected may be used to determine my eligibility for the YES program, for security purposes, for the evaluation and accountability of the YES programs.

| | |
|-----------------------|-----------------------|
| Participant signature | Date (YYYY - MM - DD) |
|-----------------------|-----------------------|

| For CIDA use only | | |
|-------------------------------|-------------------------------|------------------|
| Date received: YYYY - MM - DD | Date of entry: YYYY - MM - DD | Entered by: Name |

| PART C — To be completed by project co-ordinator after internship is complete | | |
|---|---|--|
| 28 Participant did not complete the internship Reason: <input type="checkbox"/> Did not follow through <input type="checkbox"/> Moved <input type="checkbox"/> Returned to school <input type="checkbox"/> Employed / Self-employed <input type="checkbox"/> Not active in labour force <input type="checkbox"/> Other _____ | 29 Participant completed the internship Participant is now <input type="checkbox"/> Searching for employment <input type="checkbox"/> In skills enhancement <input type="checkbox"/> Employed / Self-employed <input type="checkbox"/> Making career decisions <input type="checkbox"/> Returned to school <input type="checkbox"/> Not employed | Date of early termination (YYYY - MM - DD) / Date of completion (YYYY - MM - DD) |
| 30 Project co-ordinator's name | | Signature |
| | | Date (YYYY - MM - DD) |