

For Office Use Only

ACCESS SUMMER STUDENT EMPLOYMENT APPLICATION

1. Original 2 . Amendment 3 . Correct	Amendment No					
PART A - EMPLOYER INFORMATION (to !	oe completed by appli	icant)				
1. Legal Name of Employer	2. Common Name	of Employer		3. Area Code and Telephone:		
				4. Area Code and Fax:		
5. Mailing Address	6. Name of Contac	ct Person		7. Title of Contact Person		
	8. E-Mail Address of Contact Person			9. Area Code & Telephone of		
				Contact Person		
Postal Code:	10. Address of Sur	mmer Student Employmen	t Activity (i	f different from box 3)		
	Postal Code:					
11. Canada Customs and Revenue Agency Business/Charitable Registration Number				. What is the main product or service your organization?		
	13. Number of Employees					
15. Employer Type: Not-For-Profit Sector C)nlv	<u> </u>	17	. Does the employer owe any amount		
10. Employer Type. Not 1 of 11 ont occion o	, in y			o ACCESS from previous contribution		
Indigenous not-for-profit groups/organization	S			agreements for which they are currently		
Indigenous associations of workers &/or emp				default?		
Indigenous local community, charitable, volu		(If yes, attach letter of Union Yes		s How much?		
		concurrence with this	ls t	his for overpayment, CCRA		
Indigenous colleges/training institutes		application)	ren	nittances, penalties?		
Indigenous programs at public/private colleg	es/universities					
Other (explain)			No			
	1					
18. Workers Compensation (if applicable) Account No Rate	1					
Insurer Name	Policy Number	r				
insuler Name	r oncy runiber					
PART B – SUMMER STUDENT EMPLOYM	ENT PROJECT INFO	RMATION				
19. Anticipated Start and End Date of Project	t May2022 - A	.ug2022				
20. Number of Positions Requested	21. Titles of Positions 22.			Wage Rate per Hour for Each Position		
	l			l		
	II		II.			
	24. Name of Supervisor(s) (if different from 25			of education suitable for each job		
Been Attached to this Application.	contact person) for ea	ach position	(secondary, college, university, other –			
YES	l	specif				
	II		l.			
This is a Mandatory Requirement.			II.			
Your Application May Be Delayed If						
Job Descriptions Are Not Attached.						

PART C – PROJE Job Title	Number	X No.	X Hours	V Magas	Cubtotal	X 12%	Total Magas	Total	Total
JOD THE	of jobs for this position	of weeks per job	per week per job (not to exceed 35 hours per week)	X Wages per hour	= Subtotal Wages	MERCS Per Job (for CPP, El, vacation @4% for employer costs)	= Total Wages and Benefits	Contribution Request from ACCESS	Employer Contribution
Example Summer Student	1	16	35	\$15.20	\$8,512	\$1,021.	\$9,523.		
Subtotals									

TOTAL REQUESTED	\$
FROM ACCESS	

NOTE:

Please ensure your application adheres to the guidelines in the attached *Summer Student Employment Program Application Guidelines*.

A written proposal is not necessary. Please attach job descriptions to this Application Form and send to:

ACCESS Program Office: Elaine Clare

Address: 108-100 Park Royal South

West Vancouver, Vancouver, BC V7T 1A2

Fax: 604-913-7938 ext 229

Telephone: 604-913-7933