

Company Intake Form

All companies participating in the Sudbury Workforce and Immigration Program must complete this form.

1. Company Information

a) Company Operating Name	
b) Company Legal Name	
c) Federal Business Number (Issued by CRA)	d) Ontario Business Identification Number (BIN)
e) Street and Number	f) City
g) Province	h) Postal Code
i) Number of Locations	j) Industry

2. Representative Contact Information

Primary Contact	
a) Full Name	b) Position
c) Phone	d) Email
Additional Contact	
a) Full Name	b) Position
c) Phone	d) Email
Additional Contact	
a) Full Name	b) Position
c) Phone	d) Email

3. Workforce Assessment

a) Tell us about your business. How many employees do you currently have?	
Number of full-time staff	Number of part-time staff
Number of seasonal staff	Number of permanent staff
b) What recruitment struggles has your company encountered?	

c) What have you identified as factors affecting your recruitment strategies?

d) Where has your company posted positions over the past 6 to 12 months?

e) What other recruitment efforts has your company utilized over the past 6 to 12 months? Check all that apply.

<input type="checkbox"/>	Internships / Co-op students	<input type="checkbox"/>	Apprenticeships	<input type="checkbox"/>	Bursaries (high school, college, etc.)
<input type="checkbox"/>	Job Fairs (local, regional, provincial)	<input type="checkbox"/>	Underrepresented groups (women, Indigenous peoples, youth, etc.)	<input type="checkbox"/>	Partnership with Indigenous communities
<input type="checkbox"/>	Other				

Please provide further details:

f) Which is the closest post-secondary institution that offers programs related to the position(s) you are hiring for?

4. Eligibility Assessment

a. Why is your organization interested in participating in the Rural and Northern Immigration Pilot Program?

b. Have you previously recruited internationally? If so, please describe your experience.

c. What positions are currently available within your organization?	
Position title	Number of vacancies
Position title	Number of vacancies
Position title	Number of vacancies
Position title	Number of vacancies
Position title	Number of vacancies
Position title	Number of vacancies
Position title	Number of vacancies
d. What positions will you need to fill in the next 12 to 24 months?	
Position title	Number of vacancies
Position title	Number of vacancies
Position title	Number of vacancies
Position title	Number of vacancies
Position title	Number of vacancies
Position title	Number of vacancies
Position title	Number of vacancies
e. Describe the impact on your business of not filling these positions.	
<p>f. Is your business open to supporting the settlement of newcomers in the community and your workplace?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>This may include the following:</p> <ul style="list-style-type: none"> ▪ Establishing a partnership with a settlement service provider organization; ▪ Supporting newcomers' (the foreign national and their family) in accessing settlement services, including possible related financial commitments <ul style="list-style-type: none"> - Interpretation and translation services + Language training - Flexible work schedule to access services ▪ Fostering a welcoming workplace <ul style="list-style-type: none"> - Culture and diversity awareness training for current employees <p>Mentorship program</p>	

For office use only	
Further information required on:	
<input type="checkbox"/> Post-secondary institution placements	<input type="checkbox"/> Integration of newcomers in the workplace
<input type="checkbox"/> Employment service providers	<input type="checkbox"/> Diversity in the workplace
<input type="checkbox"/> Indigenous partnerships	<input type="checkbox"/> Other:
Next steps:	
<input type="checkbox"/> Further work required	<input type="checkbox"/> Diversity Assessment
Signature:	Date: