



Wikwemikong Development Commission
o/a Enaadmaagehjik

2024 Summer Career Program Employer Application Checklist

For your application to be processed please complete application and attach files below:

1. Job Position and Description:

Attach job descriptions; including level of education suitable for each job and qualifications needed.

2. WSIB Account Number #

3. WSIB Clearance Certificate

4. Canada Revenue Agency Number # /Employer #

Once you have been approved, I will submit the resumes of the approved candidates to your workplace on June 28th in the afternoon. Following this, you can commence Job Interviews **from July 2nd until July 12th**.

Once you have successfully hired your candidate(s), your role becomes crucial. **Please send me a memo stating who and what position(s) have been filled.** Upon receiving it, I will promptly send over the Summer Career Programs Contract and Agreement. Your swift action in signing and sending it back is highly appreciated.

The summer students' first day of work, **scheduled for July 15th**, is a significant milestone in their journey. They will undergo mandatory orientation where they will receive WHMIS 2015 training, a workplace ethics, their rights, and responsibilities and from 10:00 am to 12:00pm. Your support in ensuring their attendance is invaluable and greatly appreciated.

Optimal Health and Safety training can be provided is the Workplace Health and Safety Training can be done online and free at <https://www.labour.gov.on.ca/english/hs/elearn/worker/foursteps.php>.

Note: If your workplace requires PPE or scrubs, non-slip shoes, steel toe boots etc. Your employee(s) may be eligible for mobility assistance. Please call, email, or pick up at the WDC Office. Or can access Mobility Assistance forms on the website at <https://wikydevcom.ca/wlms/types-of-funding/>

Applications must be dropped off at WDC office or can be sent to Summer Career Coordinator – Leeann Peltier.

Email: scpcordinator@wikydevcom.ca

Fax: (705) 859-2000

Telephone: (705)859-3001

Created by: L. Peltier

Created: May 09,2024

Approved by: M.L. Odjig

SCP Employer Checklist Application Form



Summer Career Program-Employer Application Form 2024

Wikwemikong Development Commission/Wii ni n'guch-tood LDM
 2102 Wikwemikong Way, Wikwemikong ON P0P2J0
 Tel: 705-859-3001
 Fax: 705-859-2000

APPLICATION DEADLINE: June 14th 2024

Summer Student Start Date: July 15, 2024

PART A: EMPLOYER INFORMATION											
Legal Name of Employer:											
Address:											
Town/City:						Postal Code:					
Main Contact Person:											
Email:											
Tel:				Ext:			Fax:				
Employer Type: <input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Non-for-Profit		Which level of student do you intend to hire? <input type="checkbox"/> Secondary <input type="checkbox"/> Post-Secondary		Has the appropriate union concurred with this application? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable If yes, please attach union concurrences. If no, please explain.			Other funding: Have you applied to other government programs to fund any of the jobs proposed in this application? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please specify; _____ _____				
PART B: CALCULATIONS OF EMPLOYERS REQUEST											
W.S.I.B. Account Number:				W.S.I.B. Rate:				Please attach WSIB Clearance Certificate			
Please attach Certificate of Insurance Coverage (if no WSIB)											
Canada Revenue Agency Number:											
(A) Please fill out the chart below based on the format given. Job Title(s): _____											
Start Date: July 15, 2024						End Date: August 23, 2024					
(A) No. of Job s	(B) No. of Wks	(C) Hrs/ Wk.	(D) Total Hrs.	(E) WDC Hourly rate Contrib.	(F) Employer Hourly rate Contrib.	(G) Total Wages D*E+F	(H) Vac. Rate (G*4%)	(I) EI Rate (G+H* 2.32%)	(J) WSIB (G+H* rate)	(K) Total Request (G+H+I+J*A)	
6	35	210	\$16.55								
Attach job descriptions; including level of education suitable for each job and qualifications needed.											

Applicant's Signature: _____ Date: _____