

Vocational Rehabilitation Services

## RE-EMPLOYMENT & JOB SEARCH ASSISTANCE REFERRAL FORM

Please complete form, and return by fax or email

Fax # 204.775.7588 E-mail: info@ccicanada.com

■ Referral Date			Contact Person	
■ Cor	mpany			
■ Add	dress			
■ Phone #		• Fax #	■ E-mail	
■ Billi	ng information (if diffe	rent from above)		
■ Rea	ason for Referral:			
	On-site Notification	Assistance		
	Job Search Reading Interview Techniques		sume, References, Cover Lette	r, Networking Cards,
	<b>Supported Job Search Assistance</b> : Job Search Readiness plus Career Exploration, in-depth Pre/Post Interview Coaching, Monitored Job Search, Targeted Job Application Assistance, Researching/Identifying Employers, Job Search Strategies			
CLIE	ENT INFORMATIO	N		
■ Name		<u>.</u>	■ Phone #	
■ Ado	lress			
■ Occ	cupation			

If you require assistance completing the form or additional information, please contact our office.