

Vocational Rehabilitation Job Search Contact Sheet

WSCC Claim No:	Job Contacts for Period From:	YY	MM	DD	To:	YY	MM	DD
Waykar'a Nama	Worker's Phone No:							
Worker's Name:	VVOIRGES FIIUHE INC.							
Employer:	Address:							
Contact Person:	Phone No:	Fax No:						
Job Applied For:		Date:						
Completed Application: No Yes		Submitted Resume: No Yes						_
Applied in Person: No Yes	_	Applied by Fax or Mail: Fax Mail						
Applied Online: No Yes	Website Address:							
Comments:								
Employer:								
Contact Person:								
Job Applied For:		Da	ate:					
Completed Application: No Yes					: No			
Applied in Person: No Yes	_	Ap	oplied by	Fax or M	1ail: Fax		_ Mail	
Applied Online: No Yes	Website Address:							
Comments:								
Employer:	Address:							
Contact Person:								
Job Applied For:								
Completed Application: No Yes			ubmitted	Resume	: No	Y	es	_
Applied in Person: No Yes					fail: Fax			
Applied Online: No Yes			opcu 2)					
Comments:	Woodile / Address.							
- Commonice								
Employer:	Address:							
Contact Person:				Fax	No:			
Job Applied For:		Da	ate:					
Completed Application: No Yes		Sı	ubmitted	Resume	: No	Y	es	_
Applied in Person: No Yes	-	Ap	oplied by	Fax or M	1ail: Fax		_ Mail	
Applied Online: No Yes	Website Address:							
Comments:								
Employer:	Address:							
Contact Person:								
Job Applied For:								
					: No			
Completed Application: No Yes Applied in Person: No Yes								
					1ail: Fax			
Applied Online: No Yes	vvedsite Address:							

Head Office: Box 8888 ◆ Yellowknife, NT X1A 2R3 ◆ Telephone: (867) 920-3888 ◆ Toll Free: 1-800-661-0792 ◆ Fax: (867) 873-4596 ◆ Toll Free Fax: 1-866-277-3677 or