

Lac La Biche County Rural Renewal Stream Candidate Letter of Endorsement Application Form

CANDIDATE NAME*

Full Name:	
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 N/A
 Check this box
 if you have no
 last name

*Ensure the name listed is the **same** on your official documents such as your Passport.

CANDIDATE ADDRESS

Permanent Address = Your permanent place of residence; the address on your passport or driver's licence
Mailing Address = Where you get your mail, e.g. P.O. Box 123
Physical/Street Address = Location of your current place of residence, e.g. 1234 ABC Street

Permanent Address:		City/Town:	
Province/Territory:		Postal Code:	Country:
Mailing Address:		City/Town:	
Province/Territory:		Postal Code:	
Physical/Street Address:		City/Town:	
Province/Territory:		Postal Code:	

EMPLOYMENT INFORMATION

Business Name (place of work):			
Business Address	Street:		
	City/Town:		
	Province:		Postal Code:
Employer Contact Name:			
Employer Contact Email:			
Employer Contact Phone #:			

Please include the offer letter of employment with this application.

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Important Note: Letters are given up to thirty days (30) from time of application to completion. Please take this into consideration upon your application and in regards to intake dates. Inquiries and in-person meetings must be arranged prior via email or telephone to ensure the appropriate staff member(s) are available to assist you.

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EMPLOYMENT INFORMATION

Job Position Title:			
Description of Job Duties:			
Length of Employment:		Hours Per Week:	
Working Conditions:			
Describe how this job supports/aligns with the economic growth of Lac La Biche County:			
Describe the employer's efforts to fill the position within Canada and the outcomes:			

"I, _____, hereby declare all the information in this application to be true."
(Print Name)

Signature of Candidate

Date

Collection Statement:

Personal information is being collected under the authority of Section 33(c) of the Freedom of Information and Protection of Privacy Act and will be used for the purpose of administering the Rural Renewal Stream Program. The personal information provided will be protected in accordance with Part 2 of the FOIP Act. If you have any questions regarding the collection, use and disclosure of personal information, please contact the FOIP Coordinator at 780-623-1747.

LETTER OF ENDORSEMENT ISSUER

Heather Stromquist
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Phone: (780) 623-5017
Website: www.laclabichecounty.com/p/rural-renewal-stream

Office Use Only

Approved

Letter Issued Date: _____ Signed: _____