



Aboriginal Skills & Employment Training Strategy
Action Plan Summary

Personal Information:

Client Name:
Address:
First Nation:
Family Status:
Age:
Source of Income:
Date Registered:

Career Planning Information:

Employment Destination

Indicate the client's employment goal – specific job (s)

National Occupation Code:

Employers

List the specific employers the client wants to work for

Action Plan

List all sponsored and non-sponsored activities, along with estimated start/end dates of each. Include all pre-employment skill development, employment preparation and job search activities as well as post-employment support and follow-up.

Activity	Sponsorship (Yes/No)	Start and End Date

Previous AHRDS/ASETS Sponsorship

List all sponsored activities, start/end dates, status – completed, discontinued, transferred

Previous Employment and Education

List employment and education history

Client's Commitment & Miscellaneous Notes

Describe the client's attitude towards employment, training, the action plan, etc.

Client's Current Request

Describe the activity(ies) the client is requesting sponsorship for at this time

Work Readiness and Next Steps

Indicate whether or not the client is work-ready after participating in the current activity. If not, describe what the next steps are in the client's plan.

Prepared By:

Approved By:

Case Manager

Date

Decision-making Authority

Date