# ProvMB Logo_clr APPLICATION FORM

**Alternate formats available upon request.**

You are not required to submit a cover letter, but may be asked to submit a resume, references, or other documentation at a later point if invited for further consideration.

The selection board will rely only on information provided in this form to determine whether a candidate will be invited for further assessment.

|  |  |
| --- | --- |
| **Advertisement #** | 37359 |
| **Job Title** | Child and Family Services Worker |
| **Department(s)** | Families, Community Service Delivery, Winnipeg Child and Family Services |
| **Location(s)** | Various positions throughout Winnipeg |

## PART 1: APPLICANT INFORMATION

**(REQUIRED)**

|  |  |  |  |
| --- | --- | --- | --- |
| First Name: | | Family (last) Name: | |
| Phone Number: | | Email: | |
| Address: | | City: | |
| Province: | Country: | | Postal Code: |

I am currently employed with the Manitoba Government in a term, regular or departmental position.

## PART 2: SCREENING CRITERIA

**(REQUIRED)**

*For each of the screening criteria for this position, describe how you meet the criteria, using significant examples from your experience.**Experience can include work, volunteer and/or educational experience.* ***You must not exceed a maximum of 200 words per screening criterion.*** *Additional criteria may be reviewed at a later stage with candidates selected for further assessment.*

|  |  |
| --- | --- |
| **Screening criteria** | **Describe how you meet each screening criterion, using specific examples as appropriate.**  ***You must not exceed a maximum of 200 words per screening criterion.*** |
| 1.  Post secondary degree in social sciences (Bachelor of Social Work Degree preferred). Other combinations of education and experience may be considered on an under fill basis at a commensurate rate of pay.  **Describe your post secondary degree in social sciences.** |  |
| 2.  Case Management experience with an emphasis on working with children and families and includes assessment, service planning and follow up, evaluation, transfer and/or closure.  **Please describe your case management experience. In your response, describe the types of cases you have managed, and your experience in the following components: assessment, service planning, evaluation, transfer and/or closure, follow-up.** |  |
| 3.  Experience working in a child and family services agency (may included university practicum experience).  **Please describe the experience you obtained working in a child and family services agency. Describe the agency, your role, and responsibilities.** |  |

## PART 3: EMPLOYMENT EQUITY DECLARATION

**(VOLUNTARY)**

*The Manitoba government recognizes the importance of building an exemplary public service reflective of the citizens it serves, where diverse abilities, backgrounds, cultures, identities, languages and perspectives drives a high standard of service and innovation.*

*The Manitoba government supports equitable employment practices and promotes representation of designated groups (women, Indigenous people, persons with disabilities, visible minorities). We encourage applicants to voluntarily self-declare.*

[*Click here for more information on the Employment Equity Policy.*](http://www.gov.mb.ca/csc/policyman/equity.html)

**Please check the boxes that apply to you. Note that you may declare in one or more of the employment equity groups.**

WOMEN

INDIGENOUS PEOPLE

PERSONS WITH DISABILITIES

VISIBLE MINORITIES

## PART 4: VETERANS’ PREFERENCE DECLARATION

**(VOLUNTARY)**

*Veteran status is a consideration in all competitions where it is deemed to be in the public interest. Completion of this veterans’ preference declaration is voluntary.*

[*Click here for more information on the Veterans’ Preference Policy*.](http://www.manitoba.ca/csc/policyman/veterans.html)

I wish to declare Veteran status

## PART 5: APPLICATION DECLARATION

**(REQUIRED)**

|  |  |
| --- | --- |
| By indicating “yes” in the adjacent box, I certify that the information provided on this application is accurate and complete to the best of my knowledge as of the date indicated below. I understand that falsified or misleading statements and omissions will result in rejection of this application and, if employed, may be cause for termination. (yes/no) |  |

Date:

**We thank all who apply and advise that only those selected for further consideration will be contacted.**