

## GRADUATE EMPLOYMENT PROGRAM

### Information Sheet

The **Graduate Employment Program** is designed to assist recent graduates of post-secondary education programs obtain employment related to their field of study.

**Eligible Employers** Profit and not-for-profit employers who can provide work experience related to the graduate's field of study.

**Eligible Individuals** Individuals who have successfully completed a post-secondary program of a minimum duration of one year (includes certificate, diploma and degree level programs); are currently unemployed or are underemployed (working less than 20 hours per week or working in an area not related to their field of study); have graduated in the past two years.

*Preference will be given to non EI eligible graduates (non EI eligible being defined as individuals currently not receiving EI benefits; and have not received EI benefits within the last three years; or have not received EI maternity or parental benefits within the last five years).*

**Financial Assistance** A 60% wage subsidy towards the starting salary of the approved position, to a maximum program contribution of \$12,500 prorated over a period of 52 weeks, and a \$500 one-time payment to the employer to assist with training costs for the new graduate based on the provision of a training plan.

Approval of applications will be considered only when applications for both the graduate and the employer have been matched.

All payments required by law to be made by an employer including Income Tax; Employment Insurance; Canada Pension; assessment under the Workplace Health, Safety and Compensation Act; holiday pay and any liability arising from this employment shall be the sole and absolute responsibility of the employer.

**Application Process:** Application forms are available from the Department of Advanced Education and Skills and can be initiated by either the graduate or the employer. See reverse for listing of offices. Applications are received on a continuous basis; however, approvals are subject to the availability of funds.

*For more information on the eligibility criteria and other program details as outlined above please refer to the Terms and Conditions on the Graduate Employment Program Application / Agreement.*

**Return completed Application to the nearest office of the Department of Advanced Education and Skills:**

### **AVALON REGION**

#### **St. John's**

Advanced Education and Skills  
285 Duckworth Street  
P.O. Box 8700  
St. John's, NL A1B 4J6  
Telephone: (709) 729-7505  
Fax: (709) 729-7513

#### **Carbonear / Placentia**

Advanced Education and Skills  
17 Industrial Crescent  
Carbonear, NL A1Y 1A5  
Telephone: (709) 945-3224  
Fax: (709) 945-3073

#### **Mount Pearl / Paradise / Conception Bay South / Southern Shore**

Advanced Education and Skills  
1170 Topsail Road  
P.O. Box 8700  
St. John's, NL A1B 4J6  
Telephone: (709) 729-0107  
Fax: (709) 729-0736

### **CENTRAL REGION**

#### **Bonavista**

Advanced Education and Skills  
P.O. Box 820  
Bonavista, NL A0C 1B0  
Telephone: (709) 468-5401  
Fax: (709) 468-1529

#### **Marystown**

Advanced Education and Skills  
P.O. Box 1142  
Marystown, NL A0E 2M0  
Telephone: (709) 279-5534  
Fax: (709) 279-7646

#### **Gander**

Advanced Education and Skills  
P.O. Box 2222  
Gander, NL A1V 2N9  
Telephone: (709) 256-1232  
Fax: (709) 256-5109

#### **Grand Falls-Windsor / St. Alban's**

Advanced Education and Skills  
42 Hardy Avenue P.O. Box 559  
Grand Falls-Windsor, NL A2A 2J9  
Telephone: (709) 292-4331  
Fax: (709) 292-4200

#### **Springdale / Baie Verte**

Advanced Education and Skills  
P.O. Box 580  
Springdale, NL A0J 1T0  
Telephone: (709) 673-2615  
Fax: (709) 673-2138

#### **Lewisporte / Twillingate**

Advanced Education and Skills  
P.O. Box 190  
Lewisporte, NL A0G 3A0  
Telephone: (709) 535-3212  
Fax: (709) 535-0265

#### **Clarenville**

Advanced Education and Skills  
294 Memorial Drive, Clarenville, NL A5A 1P1  
Telephone: (709) 466-0275  
Fax: (709) 466-4047

#### **St. Alban's**

Advanced Education and Skills  
P. O. Box 143, St. Alban's, NL A0H 2E0  
Telephone: (709) 538-3922  
Fax: (709) 538-3940

### **WESTERN REGION**

#### **Corner Brook**

Advanced Education and Skills  
Alyward Bldg. 1-3 Union Street, 2<sup>nd</sup> Floor  
Box 2006  
Corner Brook, NL A2H 6J8  
Telephone: (709) 637-2601  
Fax: (709) 637-2630

#### **Port Saunders**

Advanced Education and Skills  
Dobbin Building  
Box 10  
Port Saunders, NL A0K 4H0  
Telephone: (709) 861-3237  
Fax: (709) 861-3088

#### **Stephenville**

Advanced Education and Skills  
W.E. Cormack Building  
29 Carolina Avenue  
Stephenville, NL A2N 3P8  
Telephone: (709) 643-7954  
Fax: (709) 643-7905

#### **Channel**

Advanced Education and Skills  
P.O. Box 38  
239 Grand Bay West  
Channel, NL A0M 1C0  
Telephone: (709) 695-6246  
Fax: (709) 695-2302

### **LABRADOR REGION**

#### **Happy Valley – Goose Bay**

Advanced Education and Skills  
163 Hamilton River Road, P.O. Box 3014, Stn. B  
Happy Valley-Goose Bay, NL A0P 1E0  
Telephone: (709) 896-8846  
Fax: (709) 896-5371

#### **For Additional Information:**

Toll Free: 1-800-563-6600  
TTY: 1-866-729-4685  
Website: [www.aes.gov.nl.ca](http://www.aes.gov.nl.ca)

**GRADUATE EMPLOYMENT PROGRAM – Application / Agreement**

Amendment # \_\_\_\_\_

Project Number # \_\_\_\_\_

**Return completed Application to the nearest office of the Department of Advanced Education and Skill:**

**APPLICANT INFORMATION**

Legal Name of Business: \_\_\_\_\_

Common Name of Business (if different from legal name) \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Business Location: \_\_\_\_\_  
 \_\_\_\_\_ Business Telephone: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Business Fax: \_\_\_\_\_

Please list two persons with signing authority who may be contacted for further information. These individuals must sign this contract.

1. \_\_\_\_\_ Telephone: \_\_\_\_\_ (Bus.) \_\_\_\_\_ (Res.)

2. \_\_\_\_\_ Telephone: \_\_\_\_\_ (Bus.) \_\_\_\_\_ (Res.)

Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Accountant / Bookkeeper: \_\_\_\_\_ Telephone: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Fax: \_\_\_\_\_

Type of Business: \_\_\_\_\_ Start-up Date of Business: \_\_\_\_\_

Incorporation # \_\_\_\_\_ CRA Business # \_\_\_\_\_

Do you have Workplace Health, Safety and Compensation coverage? Yes  No  Account #: \_\_\_\_\_

Do you wish to avail of direct deposit? Yes  No  (If yes, and your application is approved, financial information will be required)

Is your business in good standing with the Registry of Companies? Yes  No

**Businesses established less than one year must provide a business plan.**

Number of employees now on staff: \_\_\_\_\_

Has the appropriate union concurred with this proposal? Yes  No  N/A

Is the position replacing regular employees or employees on lay-off? Yes  No

Is the position already funded under other wage subsidy program(s)? Yes  No

Does this job offer potential for long-term employment? Yes  No

Do you have an individual in mind for this position? Yes  No

Will the graduate receive additional training during the term of employment? Yes  No

If yes, please complete the training plan below and include both the formal and/or informal training that will be provided. This information is required to avail of the \$500 training allowance.

Position applied for: \_\_\_\_\_ Annual Salary: \$ \_\_\_\_\_

Hours Per Week: \_\_\_\_\_ Hourly Wage Rate: \$ \_\_\_\_\_

Job Description and Training Plan: \_\_\_\_\_

*Please attach another sheet if you wish to provide additional information on the position. A copy of a training plan is required to avail of the \$500 training allowance. Please include a brief outline of the training that will be provided to the graduate including both formal and informal.*

**HIRING NOT TO TAKE PLACE PRIOR TO OFFICIAL APPROVAL.**

This is to certify the above information is correct:

Signature of Employer or Duly Authorized Representative: \_\_\_\_\_ Date: \_\_\_\_\_

**COMPLETE THE FOLLOWING SECTIONS ONLY AFTER APPROVAL IS RECEIVED FROM THE PROVINCE.**

The Applicant agrees to employ the graduate listed for a 52-week period and provide work experience in the occupation related to the graduate's field of study.

Family Name	First Name	S.I.N.
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The Applicant acknowledges that they have read and agree to the Terms and Conditions stated on the reverse and that the Terms and Conditions will form part of the Agreement between the Applicant and the Department of Advanced Education and Skills.

Signature (Employee) \_\_\_\_\_ Date \_\_\_\_\_ Signature (Client Services Officer) \_\_\_\_\_ Date \_\_\_\_\_

Signature (Employer or Duly Authorized Representative) \_\_\_\_\_ Date \_\_\_\_\_ Signature (Province) \_\_\_\_\_ Date \_\_\_\_\_

**FOR OFFICIAL USE ONLY**

Total Wages: \$ \_\_\_\_\_ Total Training Allowance: \$ \_\_\_\_\_ Total Contribution: \$ \_\_\_\_\_

Start Date: \_\_\_\_\_ Finish Date: \_\_\_\_\_ FYI \_\_\_\_\_ FY II \_\_\_\_\_

## TERMS & CONDITIONS

### Employers Eligible for Funding

- 1) Profit and not for profit employers:
  - a) who agree to provide a blend of training and work experience to assist the employee in improving his/her employment prospects and making an attachment to the labour market;
  - b) with an established operation in the Province of Newfoundland and Labrador;
  - c) who pay local prevailing wage rates; and
  - d) who agree to give preference to individuals identified by the Department of Advanced Education and Skills.

### Eligible Positions

- 2) The position shall not be:
  - a) part of the regular staff, including seasonal staff;
  - b) created by the displacement of an existing employee;
  - c) those normally held by an employee on lay-off, awaiting notice or recall;
  - d) filled by promoting an existing employee unless the previous position is filled;
  - e) vacant as a result of a labour stoppage or labour / management dispute; or
  - f) the result of a reduction in regularly scheduled hours or period of work for any existing employee of the business.
- 3) The position must provide continuous employment in the Graduate's field of study for a period of 52 weeks.
- 4) The work to be performed must not be employment that:
  - a) provides personal services;
  - b) is paid solely by commission or output;
  - c) is being subsidized by another government wage subsidy program for the same position.
- 5) Position shall be in addition to existing positions. Position filled prior to approval shall not be eligible for subsidy unless otherwise approved by the Province. Failure to comply may lead to the termination of the Agreement.
- 6) Concurrence of the appropriate union/employees' association is the sole responsibility of the employer.

### Eligible Recipients

- 7) Individuals:
  - a) who have successfully completed a post-secondary program of a minimum of one year's duration;
  - b) who have graduated within the past two years;
  - c) must be currently unemployed or under-employed (less than 20 hours per week, or in work not related to their field of study);
  - d) must be legally entitled to work in Canada; and
  - e) shall not be an immediate family member of the applicant employer or, if the employer is a corporation, a member of the immediate family of a director or senior manager of the corporation. For the purpose of this section, "immediate family" means spouse, parent, grandparent, child, sibling, in-laws, or other persons residing in the employer's household.
- 8) Preference will be given to non EI eligible individuals.

### Reimbursement of Wages

- 9) All payments required by law to be made by an employer including Income Tax, Employment Insurance, Canada Pension, assessments under the Workplace Health, Safety and Compensation Act, holiday pay and any liability arising from this employment shall be the sole and absolute responsibility of the employer. Where an employee works on a statutory holiday and premium wages are paid, reimbursement will be at the approved rate only.
- 10) The employer shall, with respect to the employee, and in a form provided by the Province:
  - a) submit claims and payroll as required by the Province;
  - b) submit a final claim and payroll at the end of the Agreement or the termination of employment, whichever is sooner.
- 11) The Province will:
  - a) reimburse the employer 60% of the salary for the position up to a maximum of \$12,500 per position of 52 weeks duration for a maximum average of 40 hours per week. A minimum of 25 hours per week must be provided.
  - b) make payable a \$500 payment directly to the employer to assist with the cost of training the employee based on the provision of an applicable training plan.
- 12) The employer must pay the employee the recognized starting salary for the position as agreed to by the Province.

### Accounts and Records

- 13) The employer shall provide reports concerning the progress and particulars of the employee and the attainment of objectives and such other reports as may be required by the Province.
- 14) The employer shall keep proper accounts and records, including invoices, receipts, vouchers, bank statements, and cheques of all financial transactions relating to this Agreement and these records shall be open at all times to inspection and audit by the Province or its authorized representatives.
  - a) The employer is required to submit a final claim within 30 days following the completion or termination of employment. Failure to submit final claims and any required documentation will result in the project being considered finalized with no further payments being released. Future applications will not be considered until all

previously requested documentation is received.

- 15) The employer undertakes to respect the confidentiality of the information obtained from individuals and to use such information solely for the purposes for which it is obtained.

### Payment

- 16) The Province shall make interim payments to the employer following receipt of an interim claim and required payroll documentation, and shall make a final payment to the employer following receipt of a final claim and required payroll documentation and, if deemed necessary by the Province, upon completion of an audit by the Province or its representatives. No contribution shall be made by the Province in excess of the amounts contracted under this Agreement. No contribution shall be made except upon evidence satisfactory to the province that the expenses for which payment is being claimed have actually been expended.
- 17) The Province may withhold payment of any amount payable pursuant hereto where the employer has failed to comply with any terms and conditions contained herein, where the Province is not satisfied with the progress of the activities, or pending the outcome of an audit.
- 18) The Province may demand return of any amount in excess of the contribution to which the employer is entitled under this Agreement. Immediately upon receipt of such demand, the employer shall repay the amount specified therein, with it being agreed that such amounts are considered debts owing to the Province.
- 19) Any payment(s) due hereunder is subject to there being an appropriation of funds for the fiscal year in which the payment is to be made.

### Amendments

- 20) This Agreement shall not be amended or assigned unless both parties agree to the amendment or assignment in writing.

### Termination

- 21) Either party may terminate this agreement with a minimum of seven days written notice to the other party.
- 22) If at any time the Province is of the opinion that the employer has failed to conduct the activities in an acceptable manner or has failed to comply with any of the terms and conditions contained herein, the Province may terminate the Agreement by giving written notice thereof to the employer and any payments which would have otherwise been payable to the employer may, at the discretion of the Province, be withheld.

### General

- 23) No member of the House of Assembly, House of Commons, employee of the Department of Advanced Education and Skills, member of the Executive Pay Plan, staff employed in the office of a Member of the House of Assembly or office of a Provincial Minister of the Crown or any person or organization other than the applicant and/or the employee shall be eligible for any financial assistance or, may receive any financial gain as a result of this contract.
- 24) The applicant and/or employee shall receive the full benefit of any financial assistance available and no other person or organization may receive or collect any percentage or portion of any monies awarded under this contract unless required by law, i.e., Income Tax, Canada Pension, Employment Insurance and assessments under the Workplace Health and Safety Compensation Act.
- 25) Nothing in this Agreement shall be deemed to authorize the employer to contract for or incur any obligation on behalf of the Province.
- 26) The employer shall be solely responsible for and shall hold the Province free from any and all losses, including economic loss, expenses, damages, demands and claims arising out of or in connection with injuries (including death) or damages to any and all persons whether employee or others and to property in any way sustained or alleged to have been sustained in connection with or by reason of the performance of the employment.
- 27) The management, supervision, and direction of the employee are the sole and exclusive responsibility of the employer. Nothing in this Agreement shall be construed to appoint the employer or the employee as a servant or agent of the Province.
- 28) The employer shall obtain, prior to the commencement of employment, all permits, licenses, consents and other authorizations that are deemed necessary to permit the carrying out of the employment.
- 29) Employers must provide employee start/finish dates and hire employee within thirty days of the official approval date, unless otherwise approved by the Province. Failure to comply may lead to the termination of the Agreement.
- 30) Interruptions of employment may be permitted with prior written approval from the Province.
- 31) The employer and employee may be required, upon completion of the subsidized period or at various stages in its progress, to participate in an evaluation of the program.

### Legislation, Laws and Provincial Requirements

- 32) The employer must comply with the provisions of the Canadian Charter of Rights and Freedoms, Newfoundland Human Rights Code, Newfoundland Labour Standards Act, Apprenticeship and Certification Act and with all other applicable federal and provincial legislation.
- 33) This Agreement shall be governed by the laws of Newfoundland and Labrador.

Department of Advanced Education and Skills  
Career, Employment and Youth Services

Graduate Employment Program

**INDIVIDUAL REGISTRATION**

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**PERSONAL DATA**

Name: \_\_\_\_\_  
(First Name) (Middle) (Surname)

Address: \_\_\_\_\_  
(P.O. Box) (Street)

\_\_\_\_\_  
(City / Town) (Province) (Postal Code)

Telephone # (home) \_\_\_\_\_ Telephone # (office) \_\_\_\_\_

Cell # \_\_\_\_\_ E-mail: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: Male  Female  S.I.N. \_\_\_\_\_

Degree / Diploma / Certificate obtained: \_\_\_\_\_

**Copy of degree / diploma / certificate must be attached.**

Type of position for which your education has prepared you: \_\_\_\_\_

**EDUCATION**

List all Education / Training:

	Institution	Program	Degree / Diploma / Certificate	Date Completed
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

**EMPLOYMENT**

Are you currently employed? Yes  No

Name of Employer: \_\_\_\_\_

Describe the 4 major duties of your position:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EMPLOYMENT HISTORY**

Employer (Most Recent)	Position	Period of Employment
_____	_____	From _____ To _____
_____	_____	From _____ To _____
_____	_____	From _____ To _____

Are you E.I. eligible? Yes  No

(over ... / 2)

Are you in receipt of:

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| (A) Employment Insurance Benefits  | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (B) Income Support   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (C) Funding from any other Federal, Provincial<br>or Municipal departments and/or agencies | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

If Yes to (C), please specify: \_\_\_\_\_

Have you received Canada Student Loans? \_\_\_\_\_

Is there any additional information about yourself you wish to provide that may assist the Department in assessing this registration?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**Signature (employee)**

\_\_\_\_\_  
**Date**