



Cook Training Program

now accepting applications

Dan's Legacy is now accepting applications for its supported **Intro To Cook** training program.

The four-month program is designed for youth aged 19 to 29 who meet this criteria:

- youth aging out of care
- Indigenous youth
- young women survivors of violence and
- new Canadians

The training program will operate out of

Union Gospel Mission's commercial kitchen
658 Clarkson St. in New Westminster

with the clinical supervision of Dan's Legacy's specially trained therapists. Counselling support will be available to all students before, during and after the training.

1 week Orientation

(meet the Chef Instructors, counsellors, life-skills coach & program managers)

12 week Introduction to Cook training program

3 week practicum in a professional environment

Upon completing the course, assistance will be provided to help the student secure work in the field, or continue on to further training in culinary programs such as those offered by Vancouver Community College or the Nicola Valley Institute of Technology's Indigenous Professional Cook Program.

Please complete the application, scan and email to

Project Manager Andrew Wong
andrew@danslegacy.com



www.danslegacy.com



311- 815 5th Ave.
New Westminster
BC
V3M 1Y1

Dan's Legacy Cook Program

Registration Form

Applicant Information

Full Name: _____ Age: _____
First Last

Birthdate: _____
Day Month Year

Address: _____
Street Address Apartment/Unit #

City Province Postal Code

Phone: = _____ Email: = _____

Do you prefer phone or text?

Ethnicity: _____ Gender: _____

for our funding purposes, are you a Canadian Citizen, Landed Immigrant, or Indigenous

Can you legally work in Canada? YES NO If no, are you in the process of an application? YES NO
 = = = =

Have you ever been in Government Care? YES NO
 = =

Do you have a BC driver's license? YES NO
 = =

Do you have transit fines owing? YES NO If yes, how much?
 = =

Have you had a criminal conviction? YES NO If yes, what?
 = =

Education

What is the highest grade you achieved? _____

Did you graduate from high school? YES NO If yes, where?
 = =

Medical Emergency Contact

Do you have a current medical condition? YES NO
 = = If yes, what?

Please list three individuals who could serve as emergency contact. First preference parent or legal guardian.

Full Name: _____ Relationship: _____

Address: _____ Phone: _____

Email: _____

Full Name: _____ Relationship: _____

Address: _____ Phone: _____

Email: _____

Full Name: _____ Relationship: _____

Address: _____ Phone: _____

Email: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

I understand that I will be preparing food for others, and promise to handle food in accordance with Fraser Health Guidelines.

I understand safe practice is required to work in a Dan's Legacy kitchen, and take full responsibility for my own actions in the event of accidents or injury.

Signature: _____ Date: _____