



Vacancy Registration Form

Northern Ontario Grant Assistance Program

Please return to:
 Grant Assistance Program Administrator
 680 Kirkwood Drive
 Sudbury ON P3E 1X3
 Tel: (705) 675-9193 ext. 8410
 Toll Free: 1-866-989-9299
 Fax: (705) 670-3152
 Email: info@nogap.on.ca

Agency Information

Agency / Organization

| | | | |
|---------------------|-------------------------|-------------------|--------------------|
| Address | City/Town | Province | Postal Code |
| | Telephone Number | Fax Number | |
| Contact Name | Title / Position | Email | |

Vacancy Information

Social Service Professionals

Psychologist
 Psychological Associate
 Psychology (MA)
 Social Work (MSW)
 Child & Youth Worker
 Developmental Services Worker
 Early Childhood Educator
 Social Services Worker

Rehabilitation Professionals*

Audiologist
 Chiroprapist
 Occupational Therapist
 Physiotherapist
 Speech-Language Pathologist

(*May only be registered by Children's Treatment Centres and Pre-school Speech and Language Programs)

| | | |
|---|---|--|
| Closing Date <small>(mm / dd / yy) optional</small> | Start Date <small>(mm / dd / yy) optional</small> | Position <input type="checkbox"/> Full Time Permanent <input type="checkbox"/> Contract Bilingual <input type="checkbox"/> Yes <input type="checkbox"/> No Length of Contract: |
|---|---|--|

Please state whether the position has become vacant due to the departure of a grant recipient.

Yes No

Reason for new vacancy:

New position Termination
 Retirement Other _____
 Resignation

Note: Vacant positions must be registered prior to the hiring process in order to be eligible under this program. Only permanent full-time vacant positions or temporary, full-time 12 month contracts (or longer) are eligible.

| | | |
|------------------|--------------|-------------|
| Signature | Title | Date |
|------------------|--------------|-------------|