

**THUNDER BAY HOST PROGRAM  
NEWCOMER REGISTRATION FORM**

<b>For Host Program Use Only</b>		
Referred by: _____		
Orientation Date: _____	Understanding Date: _____	SW: _____
Matched with: _____	Date: _____	Completed: _____
Matched with: _____	Date: _____	Completed: _____
Matched with: _____	Date: _____	Completed: _____
Matched with: _____	Date: _____	Completed: _____

To be completed by the main contact person.

**First Name:** \_\_\_\_\_ **Family Name:** \_\_\_\_\_ **Gender:** male female

**Address:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**North Ward:** \_\_\_\_\_ **Intercity:** \_\_\_\_\_ **South Ward:** \_\_\_\_\_

**Telephone:** Home \_\_\_\_\_ Work \_\_\_\_\_ Email \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Employment Status:** Full Time \_\_\_ Part Time \_\_\_ Retired \_\_\_ Student \_\_\_ Seeking Employment \_\_\_

**Present Occupation:** \_\_\_\_\_

**Occupation in your Country:** \_\_\_\_\_

**Education Level:** Elementary \_\_\_ Secondary \_\_\_ College/Technical (field of study) \_\_\_\_\_  
University (field of study) \_\_\_\_\_ Post Graduate \_\_\_\_\_  
No formal Education \_\_\_\_\_

**Knowledge of English:** Limited \_\_\_ Moderate \_\_\_ Fluent \_\_\_\_\_

**Country of Origin:** \_\_\_\_\_

**Mother Tongue:** \_\_\_\_\_ **Other Languages:** \_\_\_\_\_

**Immigration Status:** Convention Refugee \_\_\_ Designated Class \_\_\_ Independent \_\_\_ M Permit \_\_\_  
Family Class \_\_\_ Assisted Relative \_\_\_ Refugee Claimant \_\_\_ Other \_\_\_

**Foss-ID, or IMM 1000 - W, or Ministerial Permit Number:** \_\_\_\_\_

**Arrival date in Canada?** \_\_\_\_\_ **in Thunder Bay?** \_\_\_\_\_

**Family Composition:** Single \_\_\_ Married \_\_\_ Single Parent \_\_\_ Common Law \_\_\_  
Widow/er \_\_\_ Other \_\_\_\_\_

**Other Family Members:**

Names:	Date of Birth:	Relationship:	Status:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**PLEASE  
TURN OVER**

**How did you spend your leisure time in your country?** (special skills, training, hobbies, and interests) \_

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**How do you spend your free time in Canada?** \_\_\_\_\_

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**What interests you in the Host Program?** (practice English, meet people, learn more about Canada, share experiences, friendship) \_\_\_\_\_

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**How did you hear about the Host Program?** \_\_\_\_\_

**Do you have any preferences about your Host Volunteer(s)?** (For example: age, gender, language, family composition, individual, religion, etc.): \_\_\_\_\_

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**When are you available to meet with your match on a regular basis?**

daytime \_\_\_\_\_ evenings \_\_\_\_\_ weekends \_\_\_\_\_

**How many hours per week would you like to spend with your match?**

0 - 1 \_\_\_ 1-3 \_\_\_ 3-5 \_\_\_ more than 5 \_\_\_

**What is your main form of transportation?**

vehicle \_\_\_\_\_ bus \_\_\_\_\_ taxi \_\_\_\_\_

Although all information will be kept confidential, it is necessary for some information to be shared with the staff of TBMA, the Host Volunteer, and Immigration Canada. Only pertinent information is disclosed to help ensure a good match, and meet funding requirements.

I understand that an exchange of information is necessary and authorize TBMA to share this information.

**Please provide a copy of landing documents.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (Contact Person)

Priority will be given to Newcomers who have been in Canada three years or less, but exceptions are made based on the needs of the Newcomer.

**Thunder Bay Multicultural Association**

**HOST PROGRAM**

**17 N. Court Street**

**Thunder Bay, ON**

**P7A 4T4**

**(807) 345 0551**