

**I-CAB Trust Fund Application**

*Please complete the Trust Fund Application and send to registrar@i-cab.org*

**SECTION 1: Key Contact Information**

Surname	First Name	Middle Initial
Telephone (direct line or line and extension)	Email	

**SECTION 2: Institution/Organization Information**

Please complete the information below regarding your institution/organization and the program through which you will be directing applicants:

What are the activities, or mandate, of the institution/organization	
Description of intended utilization/integration of assessment metrics	
Approximate Number of Assessments Requested (per annum)	

Organization/Institution	Telephone
Address	City/Province/State
	Postal Code/Zip Code

**SECTION 3: Criteria**

Those eligible to apply for the International Competency Assessment Trust Fund must meet one of the following criteria. Please indicate the trust criteria that your institution/organization would use assessments under:

1	<b>Age:</b> under the age of 25	
2	<b>Aboriginal/Indigenous Status:</b> currently holds Aboriginal/Indigenous Status	
3	<b>Registered Apprentice:</b> entering the workforce following completion of an apprenticeship program	
4	<b>Post-Secondary Graduate:</b> entering the workforce following post-secondary education or similar in the field of occupational health and safety	

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5	<b>Re-employment Program:</b> entering the workforce following a re-employment program	
6	<b>Retraining Program:</b> entering the workforce following re-training after suffering a workplace injury	

### SECTION 4: Declaration

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I hereby certify that all the above information is complete and true. I understand that the information disclosed on this Trust Fund Application will only be used to complete account set-up and/or for the administration and operational purposes of the I-CAB Foundation.

I am affirming on behalf of the above stated organization that assessments taken will only be used where participants satisfy one of the above criteria, and that sufficient documentation of participants' trust applicability will be retained for verification if/when required.

Signature	Date