



VACANCY NOTICE
I.A.M.A.W. EMPLOYEE ASSISTANCE
COORDINATORS

There are presently two openings for EAP Employee Assistance Coordinators in Calgary & Edmonton.

Positions: Volunteer

Anyone interested in applying should do so by e-mailing Leon Du Bois at duboiseap@hotmail.com this will allow the Regional Coordinator time to conduct any interviews that are required.

Regards

Leon Dubois

Calgary, Edmonton Regional EAP Regional Coordinator

I.A.M.A.W. EMPLOYEE ASSISTANCE COMMITTEE MEMBER APPLICATION

Anyone interested in applying for this position, should do so by fax to the Regional EAP office 604-276-3507

Name _____ Employer _____ L.L. _____

Home
Address _____

City _____ Prov . _____ Postal Code _____

Home Phone: () _____

Work Phone: () _____

Job Title / Classification: _____

Seniority / Service Date: _____ Shift _____

Company / Mail Code: _____ / _____

Company Manager: _____

Manager Phone: () _____ /Ext. _____

Please complete the following section to provide us with some information about yourself.

Have you ever served as a volunteer? Yes ____ No ____

If YES, please list organizations and type of work performed. _____

Why are you interested in being an EAP Coordinator / Referral
Agent? _____

What interests do you have that would aid you in being a Coordinator?

What training or education have you had that might be useful as a Coordinator?

What skills and qualities do you possess that would be helpful in a Coordinator role? _____

Describe in detail what you would do as a peer referral agent if an employee approached you with the following situation:

SITUATION 1: Employee comes to you stating that he is having nightmares. Nightmares always about working in confined areas. He is waking up screaming and his wife is getting concerned. How would you handle this?

What do you think should be done to help individuals who are experiencing problems as a result of:

- a) a severe traumatic incident:
- b) emotional difficulties:
- c) family or marital problems:
- d) alcohol and / or drug abuse:
- e) financial problems:
- f) employee / supervisor difficulties:

Describe how you cope with stress:

List three specific skills you want to learn from the Peer Referral Agent training program:

How important do you feel confidentiality is for a peer referral agent?

0__1__2__3__4__5__6__7__8__9__10
not important very important

How important is becoming a peer referral agent / coordinator to you?

0__1__2__3__4__5__6__7__8__9__10
not important very important

Signature _____ Date _____

PLEASE NOTE: THE INFORMATION YOU PROVIDE WILL BE HELD IN THE STRICTEST CONFIDENCE AND WILL IN NO WAY, SHAPE OR FORM, MAKE UP PART OF YOUR PERSONNEL FILE. ONCE SUITABILITY FOR CANDIDACY IS DETERMINED, OR DECLINED, THIS DOCUMENT WILL BE DESTROYED AND NO RECORD KEPT.

THIS DOCUMENT IS DESIGNED TO SELECT SUITABLE INDIVIDUALS AS REFERRAL AGENTS / COORDINATORS ONLY.

**PLEASE RETURN BACK TO YVR REGIONAL EAP OFFICE
FAX 604-276-3507**