

Task Title: Complete a Simple Personal Information Form

OALCF Cover Sheet - Practitioner Copy

Learner Name:								
Date Started:								
Date Completed:								
Successful Completion: Yes No								
Goal Path:	Employment		Apprenticeship					
Secondary School	Post Secondary		Independence					

Task Description: Complete the personal information sections of a Canada Post Mail Forwarding (Change of Address) form.

Main Competency/Task Group/Level Indicator:

• Communicate Ideas and Information/Complete and create documents/B3.1a

Materials Required:

• Pen/pencil and paper and/or digital device

Task Title: CompleteaSimplePersonalInformationForm_EI_B3.1a

Learner Information

When preparing for a move, it is a good idea to purchase the mail forwarding service from the post office. Mail addressed to the old address will then be forwarded to the new address.

Scan the Canada Post Mail Forwarding form.

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MAIL FORWARDING

Français au verso

This service is available at canadapost.ca/mailforwarding

SERVICE DETAIL	c						_				
	20						1 - 2 - 40 - 22				
1. What is the service	vice for? (Select the option that best applies) 3. Who is the service for (if residential requ			al requ	est)?		5. Are all residents of the current address moving or temporarily relocating to the new address?				ily relocating
☐ Moving to a new add	dress		Yourself and any others at the same ac			☐ Yes	□ No				
☐ Temporarily relocating and returning to original address ☐ On behalf of other people only			☐ On behalf of other people only				By checking this b	ox. Lund	erstand and conf	irm that:	
Other (Manage self or relocating)	or other people's mail at a	different address without			V W A 19	☐ By checking this box, I understand and confirm that: - I am authorized to purchase Mail Forwarding on behalf of those named below;			d holow:		
2. What type of mail	e of mail are you forwarding? 4. Does this include a deceased individual		idual?			I have read and agree to the Terms and Conditions; it is a criminal offense to purchase Mail Forwarding					
☐ Residential	☐ Business (must also		Yes (also check box in the Mail Recipie	ents sec	tion) 🗌 No		without their prior consent; and			Iudis	
residential and business mail) - the information provided will be used to forward mail upon payment.											
REQUESTOR'S D	ETAILS	**		70							
Fi	irst name		Last name			Email add	ress*		Day	time telephone n	0.
*By providing your email not disclosed to other of		rom the following: receive	an electronic receipt, service-related commu	nication	s and offers that might i	nterest you; an	d access the online self-serve	tool to ext	end or make chang	es to your service.	Your email is
MAIL RECIPIENT	'S										
			all your mail is forwarded, use your name as 8 names. The first four names are included in			issued photo I	D. Do you go by an alternate	name?	Yes 🗌 No		
				ceased							Deceased
1) First name or Business na	me	Last name			5) First name			Last name			
2) First name or Business nam	ne	Last name			6) First name			Last name			
3) First name Last name			7) First name			Last name					
					- Market Constant Constant						
4) First name		Last name			8) First name			Last name			
WHAT IS THE CURRENT ADDRESS?											
Will is the co	MARCH NOONESS										
Unit/Apt no.	Street no.		· ·	reet nar				1	PO Box no.	DD wa	(rural only)
Onto Apt no.	Street no.		30	reet man	ne				FO BOX IIU.	NN HO.	(tural only)
		City/M	unicipality				Province			Postal code	
WHAT IS THE NEW ADDRESS?											
								ľ			
Unit/Apt no.	Street no.		St	reet nar	me .				PO Box no.	RR no	(rural only)
Ones perios	Sugarior			J.CCL Hui					TO DOMINO.	744-110	(tatal any)
City/Municipality					Province	Postal/	Zip code	Coun	try		
EFFECTIVE SERVICE DATES											
When will the service start? (Start date must be at least 3 business days from today) Enter an end date if the service is for Temporary relocation or Other. Mail delivery resumes the next business day following your end date.											
year month day					Mail o year	delivery resumes the next busi month	ness day fo	llowing your end d			
						1 1			Li		

Work Sheet

Task 1: Complete the Canada Post Mail Forwarding form provided using the following information:

- You are moving to a new address
- The service is for you only
- Current address: Your mailing address
- New address: 123 Main Street, Ottawa, Ontario, L9L 3M3
- Effective Service Date: January 1 of next year

Answer:					
Task completed:	Yes:	No			

Answers

Task 1: Complete the Canada Post Mail Forwarding form provided using the following information:

- You are moving to a new address
- The service is for you only
- Current address: Your mailing address
- New address: 123 Main Street, Ottawa, Ontario, L9L 3M3
- Effective Service Date: January 1 of next year

Answer: Answers will vary for each learner. Ensure that information is filled out completely with personal information, current and new addresses, and effective service date correctly entered into the form.

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Performance Descriptors

Levels	Performance Descriptors	Needs Work	Completes task with support from practitioner	Completes task independently		
B3.1a	make a direct match between what is requested and what is entered					
	makes entries using familiar vocabulary					
This task: Was successfully completed Needs to be tried again						

This task: Was successfully completed	Needs to be tried again
Learner Comments:	
Instructor (print):	Learner (print):